Alabama Community College System



APPLICATION FOR EMPLOYMENT Central Alabama Community College

n ion	Title of position for which you are applying:									
Position Information	•	, ,		<u> </u>						Date of Application
Pc Info										
	Last Name					First Na	ame			Middle Initial
le no	Address			City					State Zip	
Personal Information										
Pe Info	Contact Information									
-	Phone: Home		Work		Cell	əll E-		mail Address		
			School/College			Dates At From /		Major	Mino	r Degree(s) Earned
ion	High School/ GED									
y and Educa	College									
Secondary and Postsecondary Education	College									
Se Postse	College									
	Other (Specify)									
le no	Are you curr Community		ed or have been em college?	emplo	yed wit	hin the la	ast twel	ve months	s at an	Alabama
ditional omation	□ Yes		□ No							
Additional infromation	If yes, list the name of the college(s) and dates:									
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Employment History (Continued)	Reason for Le	aving			
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May we contact your current employer?

□ Yes □ No

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	Please list three references, other than relatives, who can provide information verifying qualific character, or work experience.						
	Name and Title	Address	Phone Number				
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References							
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Re							
		ncludes any person related within the fourth of profit with state or with any of its agencies.	degree of affinity or				
Family Relationship	Are you a relative of any employee in the Alabama Community College system, including (name of college), or any member of the Alabama Community College System Board of Trustees? Yes No						
Fan elatio	If yes, list the name(s), relationship, and employer/position of relative(s):						
ž							
(s)	Have you ever been convicted of or pled no contest or guilty to any felony or any crime involving theft, dishonesty, violence, or sexual misconduct?						
Felony Conviction(s)							
Felc nvic							
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	belief. I further acknowledge that I understand required certifications and/or licensures. And fu	ve given on this application is full and true to the best that I must provide documented verification of educ urther, I represent and warrant that I have answere	cation, experience, and d fully and truthfully all				
Consent Agreement	satisfactory criminal background investigation Community College System and/or its assign	B. I understand that any offer of employment on and I hereby authorize my employing authorit s to conduct a criminal background history investigation.	y within the Alabama tigation. I understand				
reen		or any crime involving moral turpitude is found y concerning criminal background checks will					
Agi	understand that I will be responsible for the	cost of said criminal background check. I hereby	expressly request, and				
sent	furnish such information to college officials. I ag	persons who may have pertinent information concer ree to hold such persons harmless, and I do hereby	release them from any				
Sons	and all liability for damage of any nature whatson and true information on this application may resu	ever for furnishing such information. I understand th It in disqualification or dismissal.	at failure to provide full				
U							
			-				
	Signature of Applicant		Date				
Are you a i	member of the Alabama Community Colleg	e System Applicant Pool? 🛛 Yes	🗖 No				
		Alabama Community College					
		ention Human Resources 4091 US Highway 280					
		Childersburg, AL 35044					
		378-2010 or 256-378-2011					

It is the policy of the Alabama Community College System, including all postsecondary community and technical colleges under the control of the Alabama Community College System Board of Trustees, that no employee or applicant for employment or promotion, on the basis of any impermissible criterion or characteristic including, without limitation, race, color, national origin, religion, marital status, disability, sex, age, or any other protected class as defined by federal and state law, shall be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment. (Each institution will make reasonable accommodations for qualified disabled applicants or employees.)

REQUEST, AUTHORIZATION, CONSENT, AND RELEASE FOR BACKGROUND INFORMATION

I have been informed and acknowledged that on April 13, 2016 the Alabama Community College System Board of Trustees adopted Policy 623.01 requiring criminal background checks for all new and current employees.

By signing this authorization, I hereby authorize the Alabama Community College System or its designee, to conduct criminal reference searches for felony and misdemeanor convictions at the statewide and national levels of every jurisdiction where I currently reside or where I have previously resided during the past seven years; national sex offender registry searches and a search of my driving record.

I understand that I may voluntarily consent to the use of my social security account number for the purpose of conducting a criminal background check. I further understand that my voluntary consent to use my social security account number is being requested for purposes of conducting a criminal background check, pursuant to the authority of the Alabama Community College System Board of Trustees policy regarding criminal background checks. I understand that neither the Alabama Community College System will deny me any right, benefit or privilege provided by law because of my refusal to voluntarily consent to the use of my social security account number for the limited purpose of conducting a criminal background check pursuant to the Alabama Community College System will deny me any right, benefit or privilege provided by law because of my refusal to voluntarily consent to the use of my social security account number for the limited purpose of conducting a criminal background check pursuant to the Alabama Community College System Board of Trustees policy regarding criminal background checks.

_____I voluntarily consent to the use of my social security account number for the limited purpose of conducting a criminal background check. Social Security #_____

_____I do not consent to the use of my social security account number for the limited purpose of conducting a criminal background check.

_____I consent to the use of my driver's license number to be used for the limited purpose of conducting a review of my driving history.

_____ I do not consent to the use of my driver's license number for the limited purpose of conducting a review of my driving history.

The information I have given in my employment application, interviews, and/or related resumes and documents is true, complete, and accurate.

I understand and agree that if employed, and/or during any period of employment, any false statements, misrepresentations of facts, or omission made by myself become known, my employment shall be subject to immediate termination.

I understand that in the event a conviction for a felony or any crime involving moral turpitude is found that the procedures established for the Board of Trustees policy concerning criminal background checks will be followed.

I have read and completely understand this release.

Applicant's Signature:	Date:
Applicant's Name (Please print):	
Applicant's Address:	
Applicant's Birthday:	
Applicant's Driver's License Number:	
Applicant's Driver's License State:	