Alabama Community College System

Application No.

APPLICATION FOR EMPLOYMENT

Calhoun Community College

Position Information

Title of position for which you are applying:	**Non-Credit Trainer**	Date of Application

Personal Information

Last Name	First Name	Middle Initial

Address	City	State	Zip

Contact Information

Phone: Home	Work	Cell	E-mail Address

Secondary and Postsecondary Education

	School/College	Dates Attended From / To		Major	Minor	Degree(s) Earned
High School/ GED						
College						
College						
College						
Other (Specify)						

Additional Information

Are you currently employed or have you been employed within the last twelve months at an Alabama Community College System college?

❒ Yes ❒ No

If yes, list the name of the college(s): _____

Employment History

Please list most recent employment experience first.

Employer	Telephone Number	Job Duties
Address	Dates of Employment	
Title ❒ Full-time ❒ Part-time	Hourly Rate/Salary	
Reason for Leaving		

Employment History (Continued)			
	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title ❒ Full-time ❒ Part-time	Hourly Rate/Salary	
	Reason for Leaving		

Employment History (Continued)			
	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title ❒ Full-time ❒ Part-time	Hourly Rate/Salary	
	Reason for Leaving		

Employment History (Continued)			
	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title ❒ Full-time ❒ Part-time	Hourly Rate/Salary	
	Reason for Leaving		

Employment History (Continued)			
	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title ❒ Full-time ❒ Part-time	Hourly Rate/Salary	
	Reason for Leaving		

May we contact your current employer? ❒ Yes ❒ No

Skills, Awards, Certificates or Professional Activities	

References			
	Please list three references, other than relatives, who can provide information verifying qualifications, character, or work experience.		
	Name and Title	Address	Phone Number

Family Relationship	
	For the purposes of disclosure, relative includes any person related within the fourth degree of affinity or consanguinity to any job, position, or office of profit with state or with any of its agencies. 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 If yes, list the name(s), relationship, and employer/position of relative(s):

Felony Conviction(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? ❒ Yes ❒ No If yes, explain below:

Consent Agreement		
	I represent and warrant that the information I have given on this application is full and true to the best of my knowledge and belief. I further acknowledge that I understand that I must provide documented verification of education, experience, and required certifications and/or licensures. And further, I represent and warrant that I have answered fully and truthfully all questions regarding criminal convictions/records. **I understand that any offer of employment is contingent upon a satisfactory criminal background investigation and I hereby authorize my employing authority within the Alabama Community College System and/or its assigns to conduct a criminal background history investigation. 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 further understand that I will be responsible for the cost of said criminal background check.** I hereby expressly request, and give permission to, former employers and any persons who may have pertinent information concerning this application to furnish such information to college officials. I agree to hold such persons harmless, and I do hereby release them from any and all liability for damage of any nature whatsoever for furnishing such information. I understand that failure to provide full and true information on this application may result in disqualification or dismissal.	
	Signature of Applicant	Date

Are you a member of the Alabama Community College System Applicant Pool? ❒ **Yes** ❒ **No**

Calhoun Community College
Attention Human Resources
P O Box 2216
Decatur, Alabama 35609
256-306-2591

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.)

CALHOUN COMMUNITY COLLEGE
PART-TIME NON-CREDIT TRAINER

IN THE SPACE PROVIDED BELOW, LIST THE TYPE OF TRAINING FOR WHICH YOU WISH YOUR APPLICATION MATERIALS CONSIDERED. i.e: Leadership, Safety, Computer hardware/software, etc.

_____ _____

_____ _____

_____ _____

PLEASE INDICATE THE LOCATION(S) AND TIME(S) YOU PREFER TO WORK.

DECATUR CAMPUS:
- ☐ Morning
- ☐ Afternoon
- ☐ Evening

HUNTSVILLE/RESEARCH PARK SITE:
- ☐ Morning
- ☐ Afternoon
- ☐ Evening
- ☐ Weekend

This application will not be considered complete until official transcripts and appropriate copies of certifications have been received in the Office of Human Resources at Calhoun Community College.

REQUEST, AUTHORIZATION, CONSENT, & 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.

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 nor any employing authority within 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.

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):_____

(Please Print Clearly)

_____ _____ _____
(First Name) (Middle Name) (Last Name)

_____ _____
(Maiden or Other Name(s) (Date of Birth)

(HR Office Use Only)

Submitted: _____ Disposition: _____

EQUAL EMPLOYMENT OPPORTUNITY INFORMATION

The following information is gathered solely for reporting purposes and will not be used to evaluate the applicant's qualifications, suitability, or desirability for employment.

Name _____
Last First Middle

Date of Birth _____

Gender: (*Check one*)
☐ Male
☐ Female

Ethnic Background:
Please answer BOTH questions 1 and 2.

1. Are you Hispanic or Latino? (*choose only one*)
   ☐ No, not Hispanic or Latino

   ☐ Yes, Hispanic or Latino (*A person of Cuban, Mexican, Puerto Rican, Cuban South or Central American, or other Spanish culture or origin, regardless of race.)*

2. What is your race? (*choose one or more*)
   ☐ American Indian or Alaska Native (*A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.*)

   ☐ Asian (*A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam*.)

   ☐ Black or African American (*A person having origins in any of the black racial groups of Africa.*)

   ☐ Native Hawaiian or Other Pacific Islander (*A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands*.)

   ☐ White (*A person having origins in any of the original peoples of Europe, the Middle East, or North Africa*)

MISCELLANEOUS INFORMATION

Have you ever been employed by the College? ( ) Yes ( ) No

Position: _____ Employed from _____to _____

Name(s), relationship, and department of relative(s) presently employed by the College: