



# LINCOLN UNIVERSITY APPLICATION FOR EMPLOYMENT

*Lincoln University does not discriminate on the basis of race, color, national origin sex, age or disability in its programs and activities.*

Today's Date \_\_\_\_\_ On what date could you begin employment? \_\_\_\_\_

Exact Title of Position Applied For \_\_\_\_\_  Full Time  Permanent  
 Part Time  Temporary

Code # of Position Advertised \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
 (last) (first) (middle)

Present Address \_\_\_\_\_  
 (street) (city) (state) (zip)

Have you ever been convicted of a felony?  Yes  No If yes, explain \_\_\_\_\_

Are you legally eligible for employment in the United States?  Yes  No

Are you related to any employee or Curator of Lincoln University?  Yes  No If yes, who? \_\_\_\_\_

PERSONAL DATA

CIRCLE HIGHEST GRADE COMPLETED		ELEMENTARY								HIGH SCHOOL				OTHER		COLLEGE																									
		1		2		3		4		5		6		7		8		9		10		11		12		1		2		1		2		3		4		5		6	
HIGH SCHOOL NAME	ADDRESS	COURSE OR MAJOR SUBJECT	DATES ATTENDED: FROM																								DID YOU GRADUATE? <input type="checkbox"/> NO <input type="checkbox"/> YES														
		TO																								GED <input type="checkbox"/> NO <input type="checkbox"/> YES															
COLLEGE OR UNIVERSITY NAME	ADDRESS	COURSE OR MAJOR SUBJECT	DATES ATTENDED: FROM																								DID YOU GRADUATE? <input type="checkbox"/> YES				DEGREE ATTAINED										
		TO																								<input type="checkbox"/> NO				____ GPA											
GRADUTE OR OTHER FORMAL EDUCATION	ADDRESS	COURSE OR MAJOR SUBJECT	DATES ATTENDED: FROM																								DID YOU GRADUATE? <input type="checkbox"/> YES				DEGREE ATTAINED										
		TO																								<input type="checkbox"/> NO				____ GPA											
SCHOLASTIC HONORS / SPECIAL ACHIEVEMENTS																																									
_____																																									

EDUCATION & TRAINING

List all valid occupational licenses you hold, giving number and expiration dates; list machines you operate; show apprenticeships and other type of specialized trainings, including nature of course, dates and duration.

\_\_\_\_\_

\_\_\_\_\_

Indicate any professional, craft, trade, office or other skills and abilities possessed by you (i.e., drafting, typing, shorthand, office machines)

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*(All Present and Past Employment – Most Recent First. Attach additional page if necessary.)*

Employer's Name _____	Kind of Business _____	Salary _____
Employer's Address & Telephone # _____	Dates Employed: From _____ To _____	
Your Title _____	Name of Supervisor _____	May We Contact For References? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe Your Duties _____		
Reason For Leaving? _____		

  

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Describe Your Duties _____		
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Employer's Address & Telephone # _____	Dates Employed: From _____ To _____	
Your Title _____	Name of Supervisor _____	May We Contact For References? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe Your Duties _____		
Reason For Leaving? _____		

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Are You a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	Dates of Service (from – to)	Branch of Service	Rank
Are You a Reservist? <input type="checkbox"/> No <input type="checkbox"/> Active <input type="checkbox"/> Inactive	National Guard? <input type="checkbox"/> Yes <input type="checkbox"/> No	Other (specify)	Rank

Name and Occupation	Address	Phone
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2.		
3.		

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*I certify that the above statements are correct, and if employed, understand that any false information in this application will be sufficient grounds for termination. I further agree that all rules and regulations of the University affecting my employment shall constitute a part of my appointment. I authorize the University to investigate all statements on this application and I release you from any liability which could result from furnishing the information requested. I waive the right to review information granted to me by the Privacy of Information Act, which is contained in a background investigation conducted by the University.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

*The following person has been designated to handle inquiries regarding nondiscrimination policies: Compliance Office, Lincoln University, 304-B Young Hall, Jefferson City, MO 65102-0029. Telephone (314)681-5094.*

**Return to Lincoln University ATTN: Personnel Office, 820 Chestnut St., Young Hall Rm 101, Jefferson City, MO 65102-0029**