



APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE TYPE OR PRINT)

Position Applied For	Date of Application
How Did You Learn About Us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative
<input type="checkbox"/> Inquiry	<input type="checkbox"/> MPCC Website
<input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name
Address	Street	City
		State
		Zip Code
Telephone Number(s)	Social Security Number (voluntary)	

Best time to contact you at home is: _____ AM/PM

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever been employed with us before? Yes No
If Yes, give date _____

Have you ever been convicted of a felony? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Date available for work ___/___/___ What is your desired salary range? _____

Are you available to work: Full Time
 Part Time (Please indicate Morning Afternoon Evening)
 Temporary (Please indicate dates available ___/___/___ to ___/___/___)

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if the job requires it? Yes No
(If this position includes the operation of a college vehicle, a valid operator's license will be required.)

Have you worked or attended school under any other names? If yes, give names: _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION*Application completed with "see resume" will not be accepted.*

School	Name and Address of School	Course of Study	No. of Years Completed	Diploma / Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or protected status.

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Comments: Include explanation of any gaps in employment.

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

ADDITIONAL INFORMATION

Other Qualifications Summarize special job-related skills and qualifications acquired from employment or other experiences.

SPECIALIZED SKILLS (SKILLS/EQUIPMENT OPERATED)

PC/MAC

Spreadsheet

Production/Mobile
Machinery (list)

Other (list)

Keyboard

Word Processing

WPM _____

10 Key

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. _____ YES _____ NO

PERSONAL/PROFESSIONAL REFERENCE

Have you worked or attended school under any other names? *If yes, give names:* _____

Do not include family members.

Name	Phone Number	Best Time to Call	Occupation/Relationship to You
1.			
2.			
3.			

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete. I understand that any false or misleading statements are grounds for immediate termination, regardless of when such a falsification or failure to disclose may be discovered.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

This application for employment shall be considered for this position only. Any applicant wishing to be considered for another position will be required to complete a new application.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the employer.

Official transcripts will be required for all full-time faculty, staff and administration, and all part-time faculty teaching credit classes.

I understand that any offer of employment is contingent upon satisfactory criminal background check and motor vehicle records check.

Signature of Applicant

Date

FOR COLLEGE USE ONLY

Arrange Interview? Yes No

Remarks

Interviewer

Date

Employed?

Yes No

Date of Hire

Job Title

Hourly Rate/Salary

Department