

**MIDDLE GEORGIA COLLEGE**  
**Human Resources**  
**1100 Second Street, S.E.**  
**Cochran, Georgia 31014-1599**

**APPLICATION FOR PROFESSIONAL/ADMINISTRATIVE OR FACULTY POSITIONS**

**Name** \_\_\_\_\_  
Last
First
Middle
Date

**Address** \_\_\_\_\_  
Street or Route
City
State
Zip Code
Email address

\_\_\_\_\_ / \_\_\_\_\_  
Position Desired
Business Phone
Home Phone

May we contact present employer? \_\_\_\_\_ Date Available \_\_\_\_\_ U. S. Citizen \_\_\_\_\_

If no, are you eligible to work in the U.S. \_\_\_\_\_

**COLLEGIATE AND PROFESSIONAL EDUCATION**

Dates Attended	Name and Address of Institution	Degree/Major

**PRIOR TEACHING EXPERIENCE**

Year	Name of Institution	Rank and Discipline Taught

**PRIOR ADMINISTRATIVE EXPERIENCE (In Education)**

Year	Name of Institution	Position

**OTHER PROFESSIONAL EXPERIENCE**

Year	Name of Organization	Position

**MEMBERSHIP IN PROFESSIONAL AND HONOR SOCIETIES**

Year	Name of Organization	Nature of Organization

**HONORS AND SPECIAL RECOGNITIONS**

Year	Award or Organization	Basis of Selection

**PUBLICATIONS AND RESEARCH** (Use attachment if necessary)

**ARTICLES**

Year	Title	Name of Periodical

**BOOKS AND MONOGRAPHS**

Year	Title	Name of Publisher

**RESEARCH PROJECTS (Unpublished)**

Year	Title	Auspices (Grant from foundation, etc.)

**EMPLOYMENT EXPERIENCE (Begin with present or most recent)**

Employer Name and Address	Title and Duties	From	To	Salary	Reason for Leaving
	Supervisor:				
	Supervisor:				
	Supervisor:				
	Supervisor:				
	Supervisor:				

**REFERENCES (List Three)**

Name	Home Address	Phone #	Business Address	Phone #

**PLEASE READ CAREFULLY  
APPLICANT'S CERTIFICATION AND AGREEMENT**

I certify that the information given on this application is true and correct. I understand that any false information, willful or negligent misrepresentation, or failure to disclose any requested information will constitute sufficient grounds for the College to terminate my employment, without notice. I agree to take appropriate reemployment tests required by the College on the basis of position requirements and I authorize investigation of any and all references and statements made on this application. Additionally, I understand that as a prerequisite for employment, federal law requires that I present documents verifying identity and employment eligibility.

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**Date**

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**Signature of Applicant**

**INFORMATION GIVEN IS SUBJECT TO THE GEORGIA OPEN RECORDS LAW AND MAY BE MADE AVAILABLE UNDER THAT STATUTE.**

Admission policies, activities, services, and facilities of the College do not exclude any person on the basis of race, color, age, sex, religion, national origin or disability. Middle Georgia College is an Affirmative Action Program Institution. Any individual who requires assistance for admission to or participation in any program, service, or activity of Middle Georgia College under Title II of the Americans with Disabilities Act should contact the designated Title IX and Section 504 Coordinator:

Title IX Contact (for non-students): Director of Human Resources, Chambers House, 478-934-3082.

Title IX Contact (for students): Registrar, Peacock Hall, 478-934-3036.

Section 504 Contact (students and non-students): Director of Student Services, Wiggs Hall, 478-934-3023.

# MIDDLE GEORGIA COLLEGE

1100 SECOND STREET, SE  
COCHRAN, GEORGIA 31014-1599

## HUMAN RESOURCES

PHONE: 478-934-3082  
FAX: 478-934-3440

Dear Applicant,

We appreciate your interest in employment at Middle Georgia College.

Middle Georgia is an Equal Opportunity/Affirmative Action employer and subject to certain reporting and affirmative action requirements. The information required on this insert is requested only so that we may meet our Equal Opportunity/Affirmative Action obligations. Your completion of this form is purely voluntary and will not, in any way, affect your consideration for employment. This insert will be separated from your application and will be separately maintained.

Thank you for your assistance.

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### VOLUNTARY EMPLOYMENT INFORMATION FORM MIDDLE GEORGIA COLLEGE

Name \_\_\_\_\_

Position for which you are applying \_\_\_\_\_

How were you referred to our Company?

Ad Walk-In Agency (Specify) \_\_\_\_\_ Employee (Who?) \_\_\_\_\_

State Employment Service USG Applicant Clearinghouse Other \_\_\_\_\_

Please select the appropriate information for each category:

1) Sex: Male Female

2) Race: American Indian or Alaska Native  
Asian  
African American  
Hispanic  
White