



NONDISCRIMINATION POLICY Hofstra University is committed to extending equal opportunity to all qualified individuals without regard to race, color, religion, sex, sexual orientation, gender identity or expression, age, national or ethnic origin, physical or mental disability, marital or veteran status in employment and in the conduct and operation of Hofstra University's educational programs and activities, including admissions, scholarship and loan programs and athletic and other school administered programs. This statement of nondiscrimination is in compliance with Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act Amendments Act, the Age Discrimination Act and other applicable federal, state and local laws and regulations relating to nondiscrimination ("Equal Opportunity Laws"). The Equal Rights and Opportunity Officer is the University's official responsible for coordinating its adherence to Equal Opportunity Laws. Questions or concerns regarding any of these laws or other aspects of Hofstra's Equal Opportunity Statement should be directed to the Equal Rights and Opportunity Officer at EROO@hofstra.edu, (516) 463-7310, C/O Office of Legal Affairs and General Counsel, 101 Hofstra University, Hempstead, NY 11549.

HOFSTRA UNIVERSITY HARASSMENT POLICY Hofstra's prohibition against discrimination is also addressed in Hofstra's Harassment Policy. The Harassment Policy prohibits harassment—including sexual harassment and sexual violence--based on race, color, religion, sex, sexual orientation, gender identity or expression, age, national or ethnic origin, physical or mental disability, marital or veteran status. Hofstra University is committed to professional and interpersonal respect ensuring that no individuals are subjected to harassment or discriminated against in any way on the basis of any of these protected characteristics. Harassment based on any of these protected characteristics is a form of discrimination prohibited by law and by Hofstra University's Harassment Policy. The Harassment Policy, which is available online at the link referenced below, contains complaint procedures for resolving complaints of harassment in violation of Hofstra's Harassment Policy.

Harassment policy link: http://www.hofstra.edu/pdf/Faculty/Senate/senate\_FPS\_43.pdf

All administrative employees are free to resign at any time and are subject to discharge at any time (with or without notice), and the employment relationship is not the provision of any external documents except as expressly provided by Hofstra in writing.

Please Type or Print (Ink Only)

Form fields for personal information: LAST NAME, FIRST, MIDDLE, STREET ADDRESS, APT. #, CITY, STATE, ZIP, E-MAIL ADDRESS, EVENING PHONE #, DAYTIME PHONE #, ALTERNATE PHONE #, SOCIAL SECURITY #. Includes a question: We can contact you at [ ] evening #, [ ] daytime #, or [ ] alternate #.

Position Applying for:

Check availability for employment, by checking only one category: [ ] Full Time [ ] Part Time [ ] Temporary
Referral Source: [ ] Advertisement [ ] Employment Agency [ ] Walk-In [ ] Other

Employment History:

Begin with current or most recent position and work backward. Complete in detail and include your last 10 years of employment history; explain any lapse for which time is not accounted. Include all work experience (military, part time, and volunteer).

Are you employed now? [ ] Yes [ ] No May we contact your present employer? [ ] Yes [ ] No

Comments:

Present or Most Recent Position:

Form fields for current position: Employer, Business Phone, Address (city/state/zip), Type of Business, Salary \$ per, Supervisor's Name, Position held, From (mo/yr) To (mo/yr) Full-time? [ ] Yes [ ] No (if no, # hrs./wk.) Reason for leaving: [ ] Voluntary [ ] Involuntary, Explain:

Previous Position:

Form fields for previous position: Employer, Business Phone, Address (city/state/zip), Type of Business, Salary \$ per, Supervisor's Name, Position held, From (mo/yr) To (mo/yr) Full-time? [ ] Yes [ ] No (if no, # hrs./wk.) Reason for leaving: [ ] Voluntary [ ] Involuntary, Explain:

Previous Position:

Form fields for another previous position: Employer, Business Phone, Address (city/state/zip), Type of Business, Salary \$ per, Supervisor's Name, Position held, From (mo/yr) To (mo/yr) Full-time? [ ] Yes [ ] No (if no, # hrs./wk.) Reason for leaving: [ ] Voluntary [ ] Involuntary, Explain:

EDUCATION	Name & Address of School	Number of Years Completed/ Credits Earned	Major or Program & Degree or Certificate Awarded	Date Degree Awarded
High School				
College/University				
College/University				
College/University				

**List all professional licenses you hold and/or memberships in professional organizations you belong to and indicate offices held:**

1) \_\_\_\_\_, 2) \_\_\_\_\_, 3) \_\_\_\_\_,  
 4) \_\_\_\_\_, 5) \_\_\_\_\_, 6) \_\_\_\_\_.

**List all special skills:**

1) \_\_\_\_\_, 2) \_\_\_\_\_, 3) \_\_\_\_\_

**Employment Information:**

- A. Have you ever filed an application to work at Hofstra University before?  Yes  No
- B. Have you ever worked for Hofstra University?  Yes  No  
 If you answer yes to Item B, please list department(s) worked in and dates: \_\_\_\_\_
- C. Are any of your relatives employed by Hofstra University?  Yes  No  
 If you answer yes to item C, please list name of relative: \_\_\_\_\_
- D. If you are under 18, can you furnish a work permit?  Yes  No
- E. Have you ever been convicted of any criminal offense?  Yes  No  
 If you answer yes to item E, please provide date and explain: \_\_\_\_\_  
 NOTE: a criminal conviction will be considered only in relation to the position for which you are applying.
- F. Are you currently on probation or under government supervision?  Yes  No  
 If you answer yes to item F, please explain: \_\_\_\_\_
- G. If offered a position, can you provide proof of eligibility to work in the U.S.?  Yes  No
- H. Veteran of the military service?  Yes  No
- I. Did you attach your resume with this application?  Yes  No
- J. On what date would you be available to start work? \_\_\_\_\_

**References:**

(List three persons whom we may contact regarding your professional activities.)

_____ (Name)	_____ (Address)	_____ (Phone)
_____ (Name)	_____ (Address)	_____ (Phone)
_____ (Name)	_____ (Address)	_____ (Phone)

**Campus Safety:**

The Federal Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act requires colleges and Universities to publish and distribute an annual security report containing policies as well as campus crime statistics. You can access this information on Hofstra University's web site at [www.hofstra.edu/StudentServ/IC/IC\\_Public\\_Safety\\_Report.cfm](http://www.hofstra.edu/StudentServ/IC/IC_Public_Safety_Report.cfm).

I certify that all the information on this application is accurate and complete to the best of my knowledge and belief. I understand this information is subject to verification and that my employment and/or continuance thereof may be contingent upon its accuracy and completeness. I agree and authorize Hofstra University to obtain any information pertaining to my background, for employment purposes only. I release and discharge Hofstra University and its agents from any and all liability, claims, and damages arising out of, or relating to, any investigation of my background. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that I am required to abide by the rules of Hofstra University. I understand that Hofstra University may require a subsequent background check for promotions or transfers to other positions.

Signature of Applicant  
 Date Effective 05/11/11

Date