

# Application for Academic Employment

## Form Instructions

Before completing the application, please read the following.

1. Make sure you have the most current version of Adobe Acrobat, or Adobe Reader. A free download of Adobe Reader is available here: <http://get.adobe.com/reader/>
2. Save the application to your computer **BEFORE** filling it out. Open the saved file and complete the application form. Only enter data into the saved copy.

In order to combine application materials (e.g., application form, CV, transcripts, etc.) into one PDF, the most recent version of Adobe Acrobat is needed. An alternative to combining documents electronically is to print materials, scan the hard copies as one document, and then attach the scanned document to an e-mail for submission.

# Application for Academic Employment



Date: \_\_\_\_\_ Job Number: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Department: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Previous or Maiden Name(s): \_\_\_\_\_

Address: Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

|           | Name of Institution         | Major | Degree | Date Completed/Expected |
|-----------|-----------------------------|-------|--------|-------------------------|
| Education | College or University _____ | _____ | _____  | _____                   |
|           | College or University _____ | _____ | _____  | _____                   |
|           | College or University _____ | _____ | _____  | _____                   |
|           | College or University _____ | _____ | _____  | _____                   |

| Related Qualifications | Certifications/Driver's License/Other Licenses (Complete if applicable to position for which you are applying) |             |       |                 |
|------------------------|--|-------------|-------|-----------------|
|                        | Type   | Class/State | Level | Expiration Date |
|                        | _____  | _____       | _____ | _____           |
|                        | _____  | _____       | _____ | _____           |
|                        | _____  | _____       | _____ | _____           |

## REQUIRED

**In order for your application to be complete, you must also fill out the Supplemental Application posted at:**

<https://humboldt.edu/applicantsurvey/>

**ANNUAL SECURITY AND FIRE SAFETY REPORTS NOTICE OF AVAILABILITY:** Humboldt State University is committed to assisting all members of the Humboldt State community in providing for their own safety and security. The annual security and fire safety compliance document is available on the Humboldt State University Police website at: [http://humboldt.edu/police/Downloads/clery\\_crime\\_report.pdf](http://humboldt.edu/police/Downloads/clery_crime_report.pdf). The police department website, the Annual Security Report (Clery Report) and the Fire Safety Report contain information regarding campus security and personal safety including topics such as: crime prevention, fire safety, university police law enforcement authority, crime reporting policies, disciplinary procedures and other matters of importance related to security and safety on campus. They also contain information about crime statistics for the three previous calendar years concerning reported crimes that occurred on campus; in certain off-campus buildings or property owned or controlled by Humboldt State University; and on public property within, or immediately adjacent to and accessible from the campus. If you would like to receive a hard copy of the Annual Security and Fire Safety Report which contains this information, you can stop by the Student Business Services Building Room #101 at #1 Harpst Street, Arcata, CA 95521 or you can request that a copy be mailed to you by calling 707-826-5555 or email: [hsupd@humboldt.edu](mailto:hsupd@humboldt.edu). This information is required by law and is provided by Humboldt State University Police Department.

*The University is an ADA/TitleIX/Equal Opportunity Employer and does not discriminate against persons on the basis of age, disability, disabled veteran or Vietnam-era veteran status, gender, marital status, national origin, race, religion, or sexual orientation.*

# Employment History

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Job Number

\_\_\_\_\_  
Department

List all previous employment for a minimum of five years. List your most recent employment first. Complete additional information page (s), if necessary. **All information requested below not included on the curriculum vitae must be completed.**

May we contact your present employer?  Yes  No

May we contact your previous employers?  Yes  No

| Employer #1  |  |   |
|--|--|---|
| Dates of Employment (Mo/Yr)<br>From _____ To _____ |  | Job Title _____   |
| Name of Employer _____                             |  | Immediate Supervisor _____ Supervisor's Telephone _____ |
|  |  | Employer's Address _____ Reason for Leaving _____       |

Job Duties

| Employer #2  |  |   |
|--|--|---|
| Dates of Employment (Mo/Yr)<br>From _____ To _____ |  | Job Title _____   |
| Name of Employer _____                             |  | Immediate Supervisor _____ Supervisor's Telephone _____ |
|  |  | Employer's Address _____ Reason for Leaving _____       |

Job Duties

| Employer #3  |  |   |
|--|--|---|
| Dates of Employment (Mo/Yr)<br>From _____ To _____ |  | Job Title _____   |
| Name of Employer _____                             |  | Immediate Supervisor _____ Supervisor's Telephone _____ |
|  |  | Employer's Address _____ Reason for Leaving _____       |

Job Duties

| Employer #4  |  |   |
|--|--|---|
| Dates of Employment (Mo/Yr)<br>From _____ To _____ |  | Job Title _____   |
| Name of Employer _____                             |  | Immediate Supervisor _____ Supervisor's Telephone _____ |
|  |  | Employer's Address _____ Reason for Leaving _____       |

Job Duties

**Additional  
Employment History**

\_\_\_\_\_  
Last Name First Name Job Number Department

| Employer #5  |  |                            |                              |
|--|--|----------------------------|------------------------------|
| Dates of Employment (Mo/Yr)<br>From _____ To _____ |  | Job Title _____            |                              |
| Name of Employer _____                             |  | Immediate Supervisor _____ | Supervisor's Telephone _____ |
| Employer's Address _____                           |  | Reason for Leaving _____   |                              |

Job Duties

| Employer #6  |  |                            |                              |
|--|--|----------------------------|------------------------------|
| Dates of Employment (Mo/Yr)<br>From _____ To _____ |  | Job Title _____            |                              |
| Name of Employer _____                             |  | Immediate Supervisor _____ | Supervisor's Telephone _____ |
| Employer's Address _____                           |  | Reason for Leaving _____   |                              |

Job Duties

I certify that the statements made in the materials I have submitted in application for this position are true and correct and that I have not knowingly withheld any facts or circumstances. I understand that all statements made in my application materials are subject to verification and that should I be employed at Humboldt State University, any false statements, misrepresentation or omission of facts in these materials may be sufficient reason for dismissal, no matter when discovered by the University. The application materials include this document and other materials submitted (e.g., cover letter, curriculum vita/résumé, etc.)

I recognize that if I am considered as a final candidate for this position, my present employer, any relevant previous employer, and other appropriate persons or firms will be contacted for references, and I do hereby agree to hold such employers, references, persons, etc., harmless from liability for releasing to the University upon request any and all information regarding my employment record.

I understand that Humboldt State University employs only those individuals who are lawfully eligible to work in the United States and that employment eligibility will be verified upon employment. If I do not currently have permanent eligibility to work in the U.S., I understand that it is my responsibility to obtain and/or maintain eligibility to work and that loss of eligibility to work at any future date will invalidate my employment contract. If hired, I will furnish proof that I am legally authorized to work in the United States.

I understand that all applicants under final consideration for Dean, Associate Dean, and Faculty Unit Employee (Tenure-line Faculty, Lecturer, Visiting Faculty, Librarian, Counselor, and Coach) positions will be subject to and will be required to pass a criminal background check prior to any offer of appointment. I further understand that if a U.S. citizen, I will be required to sign the document, Oath of Allegiance, as an employee in the State of California.

I have received and reviewed the ANNUAL SECURITY AND FIRE SAFETY REPORTS NOTICE OF AVAILABILITY located on page 1 of this application.

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

I am submitting this application electronically without a signature. Despite the lack of a signature, I certify that the information contained in the application is true and correct to the best of my knowledge. If I continue in the selection process, I will provide a signed application to HSU.