



LINCOLN UNIVERSITY APPLICATION FOR EMPLOYMENT

Lincoln University is an equal opportunity employer and does not discriminate on the basis of race, color, religion, age, sex, national origin, veteran status, and mental or physical disability.

PERSONAL DATA

PLEASE TYPE OR PRINT LEGIBLY; THIS APPLICATION IS A LEGAL DOCUMENT. RESUME MAY BE ATTACHED, BUT IS NO SUBSTITUTE FOR COMPLETING THIS APPLICATION.				
PRINT EXACT TITLE OF THE POSITION YOU ARE APPLYING FOR:			DATE OF APPLICATION:	
ENTER JOB CODE NUMBER (if known)			DATE AVAILABLE TO BEGIN EMPLOYMENT:	
PRINT FULL NAME			CONTACT INFORMATION	
LAST FIRST MIDDLE			TELEPHONE:	
ADDRESS			EMAIL:	
ARE YOU RELATED TO ANY EMPLOYEE OR CURATOR AT LINCOLN UNIVERSITY YES NO IF YES, IN WHAT DEPARTMENT IS YOUR RELATIVE EMPLOYED: NAME OF RELATIVE: RELATIONSHIP:			ARE YOU A UNITED STATES CITIZEN YES NO IF NO, THEN WHAT TYPE OF VISA ARE YOU AUTHORIZED TO WORK:	
HAVE YOU BEEN CONVICTED OF A FELONY OR MISDEMEANOR IN THIS LAST 10 YEARS: YES NO IF YES PLEASE EXPLAIN:				
EDUCATION				
HIGH SCHOOL ATTENDED: GRADUATE:				
COLLEGE OR UNIVERSITY ATTENDED	# YEARS ATTENDED	MAJOR	GRADUATE	DEGREE RECEIVED
OTHER JOB RELATED TRAINING (I.E. MILITARY OR VOCATIONAL):				
PROFESSIONAL LICENSES OR CERTIFICATES:				
PROFESSIONAL MEMBERSHIPS:				
REMARKS:				

LIST YOUR PRESENT OR MOST RECENT JOB FIRST. CAREFULLY ACCOUNT FOR ALL RECENT EMPLOYMENT (AT LEAST THE LAST TEN YEARS). BY GIVING COMPLETE INFORMATION, YOU WILL IMPROVE YOUR CHANCES FOR EMPLOYMENT. IF YOU NEED MORE SPACE, PLEASE ATTACH ADDITIONAL SHEETS.

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO , IF 'NO' EXPLAIN:

FROM: MONTH/YEAR	TO: MONTH/YEAR	TITLE OF YOUR POSITION				
NAME OF EMPLOYER		DUTIES OF YOUR POSITION				
ADDRESS:						
NAME OF SUPERVISOR						
PHONE						
REASON FOR LEAVING		NO. SUPERVISED	ANNUAL SALARY OR HOURLY WAGE	\$		HOURS PER WEEK
FROM: MONTH/YEAR	TO: MONTH/YEAR	TITLE OF YOUR POSITION				
NAME OF EMPLOYER		DUTIES OF YOUR POSITION				
ADDRESS:						
NAME OF SUPERVISOR						
PHONE						
REASON FOR LEAVING		NO. SUPERVISED	ANNUAL SALARY OR HOURLY WAGE	\$		HOURS PER WEEK
FROM: MONTH/YEAR	TO: MONTH/YEAR	TITLE OF YOUR POSITION				
NAME OF EMPLOYER		DUTIES OF YOUR POSITION				
ADDRESS:						
NAME OF SUPERVISOR						
PHONE						
REASON FOR LEAVING		NO. SUPERVISED	ANNUAL SALARY OR HOURLY WAGE	\$		HOURS PER WEEK

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 RULES AND REGULATIONS OF THE UNIVERSITY AFFECTING MY EMPLOYMENT SHALL CONSTITUTE A PART OF MY APPOINTMENT. I AUTHORIZE THE UNIVERSITY TO INVESTIGATE ALL STATEMENTS OF THIS APPLICATION AND I RELEASE YOU FROM ANY LIABILITY WHICH WOULD RESULT FROM FURNISHING THE INFORMATION REQUESTED. I ALSO AUTHORIZE THE UNIVERSITY TO CONDUCT A BACKGROUND INVESTIGATION.

SIGNATURE		DATE SIGNED		Return to: Lincoln University 820 Chestnut Street Young Hall Room 101 Jefferson City Missouri 65102-0029
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Title IX Coordinator

In accordance with Title IX implementing regulations at 34 C.F.R. § 106.8(a); Lincoln University has designated one employee to coordinate its efforts to comply with and carry out its responsibilities under Title IX. The coordinator's responsibilities include investigating complaints communicated to the recipient alleging noncompliance with Title IX. Section 106.8(a) also requires Lincoln University to notify all students and employees of the name, address, and telephone number of the designated coordinator. Lincoln University Title IX Coordinator contact information is as follows:

Jim Marcantonio
Human Resource Director
101 Young Hall
820 Chestnut Street
Jefferson City, Missouri 65102-0029
Phone: 573 681-5019
Fax: 573 681-5787

Non Discrimination Notice

In accordance with Title IX regulations at 34 C.F.R. § 106.9; Lincoln University does not discriminate on the basis of sex in the education programs or activities it operates. Lincoln University does not discriminate on the basis of sex in admission to or employment in its education programs or activities. Inquiries to recipients concerning the application of Title IX and its implementing regulations may be referred to the Title IX coordinator or to OCR.

Title IX Coordinator- Jim Marcantonio
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820 Chestnut Street
Jefferson City, Missouri 65102-0029
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Fax: 573 681-5787

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