



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														
<div style="display: flex; justify-content: space-between;"> LAST FIRST MIDDLE </div>	TELEPHONE EMAIL														
ADDRESS															
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:	HAVE YOU THE LEGAL RIGHT TO WORK PERMANENTLY IN THE UNITED STATES? YES NO														
EDUCATION															
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%; text-align: left;">HIGH SCHOOL ATTENDED:</th> <th style="width: 40%; text-align: left;">GRADUATE</th> </tr> <tr> <th style="text-align: left;">COLLEGE OR UNIVERSITY ATTENDED</th> <th style="text-align: left;"># YEARS ATTENDED MAJOR GRADUATE DEGREE RECEIVED</th> </tr> </thead> <tbody> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> </tbody> </table>		HIGH SCHOOL ATTENDED:	GRADUATE	COLLEGE OR UNIVERSITY ATTENDED	# YEARS ATTENDED MAJOR GRADUATE DEGREE RECEIVED										
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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 (IF ANY)	ANNUAL SALARY OR HOURLY WAGE	\$		HOURS PER WEEK
FROM: MONTH/YEAR	TO: MONTH/YEAR	TITLE OF YOUR POSITION			
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NAME OF SUPERVISOR					
PHONE					
REASON FOR LEAVING	NO. SUPERVISED (IF ANY)	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.

APPLICANT SIGNATURE

DATE SIGNED

Return to: Lincoln University
820 Chestnut Street
Young Hall Room 101
Jefferson City Missouri 65102-0029