

APPLICATION FOR EMPLOYMENT

ST. MARY'S UNIVERSITY

Human Resources

One Camino Santa Maria

San Antonio, TX 78228

(210) 436-3725

(210) 431-2223 – FAX

Visit our Website at: <http://www.stmarytx.edu>

Our job line is (210) 436-3343

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected classification.

All questions *must be answered carefully & completely*. If you have a resume, please attach it to this application after completing and signing the application.
(PLEASE PRINT or TYPE)

Position(s) Applied For	Date of Application
<hr/>	
How did you learn about us?	
<input type="checkbox"/> Advertisement - Which one? _____ <input type="checkbox"/> STMU Website <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Relative	
<input type="checkbox"/> Employment Agency <input type="checkbox"/> University Employee- Who? _____ <input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name			
<hr/>					
Address:	Number	Street	City	State	Zip Code
<hr/>					
Home Number	Cell Number	Fax Number	Email Address		
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If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No
If Yes, give date _____

Have you ever been employed with us before? Yes No
If Yes, give date _____

Do you have any relatives that work at St. Mary's University? Yes No
If Yes, Please indicate name of Relative: _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No
(Proof of citizenship or immigration status will be required **upon** employment.)

Are you currently on "lay-off" status and subject to recall? Yes No

On what date would you be available for work? _____ - _____ - _____

Are you available to work: Full Time 3/4 Time Part Time Temporary

Can you travel if a job requires it? Yes No

Can you work beyond normal work hours/days if a job requires it? Yes No

Can you work shift work if a job requires it? Yes No

EDUCATION

Name & Address of School	# Yrs. Completed	Diploma/Degree/Course Studied License/Certification/Designation
High School	1 2 3 4 (circle)	

College/Univ.	1 2 3 4 5 6 (circle)
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Graduate/Prof'l. Course of Study	1 2 3 4 (circle)
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Trade/Business/ Technical	1 2 3 4 (circle)
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Other Training/ Education

List any specialized training, apprenticeship, trade, skills and business or civic activities and offices held that you are involved with, *relevant* to your ability to perform the job for which you are applying. (You may exclude membership, which reveals race, color, religion, creed, gender, national origin, age, ancestry, disability, marital or veteran status, or any other protected classification.)

Describe any job-related training received in the United States military.

Have you been convicted of, or pleaded guilty or no contest to a felony or misdemeanor conviction (other than minor traffic violation)? _____ Yes _____ No

(Conviction will not necessarily disqualify an applicant from employment.)

If Yes, please explain

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any *job-related* military service assignments and volunteer activities and account for any periods of unemployment. (You may exclude membership, which reveals race, color, religion, creed, gender, national origin, age, ancestry, disability, marital or veteran status, sexual orientation, or any other protected classification.)

1.

Employer:	Address:		
Email Address:			
Telephone Number(s):	Name & Title of Supervisor:		
() -			
Date Employment Began:	Beginning Salary:	per	Starting Position:
/ /	\$	hr. mo. yr.	
Date Employment Ended:	Ending Salary:	per	Ending Position:
/ /	\$	hr. mo. yr.	
Description of Primary Responsibilities:			
Reason for Leaving:			

2.

Employer:		Address:	
Email Address:			
Telephone Number(s):		Name & Title of Supervisor:	
() -			
Date Employment Began:	Beginning Salary:	per	Starting Position:
/ /	\$	hr. mo. yr.	
Date Employment Ended:	Ending Salary:	per	Ending Position:
/ /	\$	hr. mo. yr.	
Description of Primary Responsibilities:			
Reason for Leaving:			

3.

Employer:		Address:	
Email Address:			
Telephone Number(s):		Name & Title of Supervisor:	
() -			
Date Employment Began:	Beginning Salary:	per	Starting Position:
/ /	\$	hr. mo. yr.	
Date Employment Ended:	Ending Salary:	per	Ending Position:
/ /	\$	hr. mo. yr.	
Description of Primary Responsibilities:			
Reason for Leaving:			

4.

Employer:		Address:	
Email Address:			
Telephone Number(s):		Name & Title of Supervisor:	
() -			
Date Employment Began:	Beginning Salary:	per	Starting Position:
/ /	\$	hr. mo. yr.	
Date Employment Ended:	Ending Salary:	per	Ending Position:
/ /	\$	hr. mo. yr.	
Description of Primary Responsibilities:			
Reason for Leaving:			

ADDITIONAL INFORMATION:

Specialized Skills	Check Skills	Equipment Operated
<input type="checkbox"/> Machines: <input type="checkbox"/> Fax <input type="checkbox"/> Copy <input type="checkbox"/> PC: <input type="checkbox"/> IBM (compatible) <input type="checkbox"/> Macintosh <input type="checkbox"/> Mainframe <input type="checkbox"/> Windows NT Operating System <input type="checkbox"/> Other: _____	<input type="checkbox"/> Typewriter <input type="checkbox"/> Calculator <input type="checkbox"/> Transcription Equipment <input type="checkbox"/> CPR <input type="checkbox"/> First Aid <input type="checkbox"/> Life Saving <input type="checkbox"/> Other: _____	Machinery: <input type="checkbox"/> Mower-Push <input type="checkbox"/> Mower-Riding <input type="checkbox"/> Edger <input type="checkbox"/> Hedger <input type="checkbox"/> Painting Equipment <input type="checkbox"/> Cleaning Solvents <input type="checkbox"/> Floor Cleaning Equip. <input type="checkbox"/> Carpenter Tools <input type="checkbox"/> Stripping Equipment

<input type="checkbox"/> Microsoft Office Software: <input type="checkbox"/> Access <input type="checkbox"/> Excel <input type="checkbox"/> Word <input type="checkbox"/> Office 2003 <input type="checkbox"/> Internet-based email <input type="checkbox"/> Outlook <input type="checkbox"/> Windows <input type="checkbox"/> '00 <input type="checkbox"/> XP <input type="checkbox"/> MAC/OSX <input type="checkbox"/> HTML Editors: <input type="checkbox"/> Frontpage <input type="checkbox"/> Dreamweaver <input type="checkbox"/> Other Other Software Knowledge: _____ _____	<input type="checkbox"/> Netscape <input type="checkbox"/> FireFox <input type="checkbox"/> Internet Explorer <input type="checkbox"/> Other Technical Computer Knowledge – List _____ _____ _____ _____ _____ _____	<input type="checkbox"/> Other – List: _____ _____ _____ _____ _____ _____
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PROFESSIONAL R E F E R E N C E S

1.) Name: _____ Phone #: () _____ - _____
Mailing Address: _____ City: _____
State: _____ Zip: _____ FAX #: () _____ - _____
Email Address: _____

2.) Name: _____ Phone #: () _____ - _____
Mailing Address: _____ City: _____
State: _____ Zip: _____ FAX #: () _____ - _____
Email Address: _____

3.) Name: _____ Phone #: () _____ - _____
Mailing Address: _____ City: _____
State: _____ Zip: _____ FAX #: () _____ - _____
Email Address: _____

If you need additional space, please continue on a separate sheet of paper.

Please read the next page carefully and remember to sign the application.

Resumes can be attached after the application is signed and completed.

Use the next page for any additional information or attach as many pages as needed.

Remember, *all attachments* are also bound by the Applicant's Certification and Agreement that you sign on the next page.

**AUTHORIZATION FOR BACKGROUND INVESTIGATION
&
CONSENT FOR RELEASE OF INFORMATION**

In connection with my employment and/or application for employment with ST. MARY'S UNIVERSITY (the "University"), I authorize the University to perform a background investigation on me or to request one by a third party.

I understand that, when considering my application for employment, when making a decision whether to offer me employment, when deciding whether to continue my employment (if I am hired), and when making other employment related decisions directly affecting me, the University may wish to check my references and/or obtain and use an investigative background report including information as to my character, credit history, general reputation and personal characteristics from a consumer reporting agency. I understand that upon written request, the University will provide additional information regarding the nature and scope of the investigation requested.

I understand that, if the University obtains such a report about me, and if the University considers any information in the report when making an employment related decision that directly and adversely affects me, I will be provided with a copy of the report before the decision is finalized. I may also contact the Federal Trade Commission about my rights under the Fair Credit Reporting Act with regard to investigative reports and investigative agencies (called "consumer reporting agencies" by the Act).

I authorize and request all persons, schools, public and private entities, courts, law enforcement agencies, armed forces, employment commissions and all other government agencies to release such information about me without restriction or qualification. I voluntarily waive all recourse against, and release the requested parties from liability for complying with this Authorization & Consent. I understand that the request for Date of Birth is only for the purpose of identifying me for background verification. I authorize a photostat or facsimile of this release to be considered as effective as the original.

By signing below, I hereby voluntarily authorize the University to obtain investigative reports about me from an investigative reporting agency and to consider the reports when making decisions regarding my employment at the University. I release the University, its officers, employees and agents from any and all liability for the preparation of any reports concerning myself or my background.

PRINT NAME

DATE

SIGNATURE

(APPLICANT - PLEASE KEEP THIS PAGE FOR YOUR RECORDS)

NOTICE OF BACKGROUND SEARCH AND INVESTIGATION

You are advised that in connection with your application for employment, St. Mary's University and/or its agents may make an investigation of your background, references, character, past employment, consumer reports, education, and criminal history record information, which may be conducted through personal interviews or which may be obtained from any state or local files, including those maintained by both public and private organizations, and all public record, for the purpose of confirming the information contained on your application and/or obtaining other information which may be material to your qualifications for employment.

You are further advised that you have a right under the *Fair Credit Reporting Act* to make a written request within a reasonable period of time for additional information regarding the nature and scope of this investigation, as well as for a written summary of your rights under the *Act*. You are further advised that prior to taking any adverse action based in whole or in part on this investigation, St. Mary's University will provide you a copy of any consumer report obtained therein and a summary of your rights under the *Act*.

You are further advised that St. Mary's University and/or its agents may transmit information obtained through this investigation to entities related by common ownership or affiliated by corporate control to St. Mary's University.

ST. MARY'S UNIVERSITY



Notification to all Applicants Clery Act

St. Mary's University is committed to providing security, safety, and service to members of the University community. The annual security compliance document is, also known as the Clery Act, now available at www.stmarytx.edu/police/.

Campus Safety brochures, which list the number of reports generated by the University Police Department, also are available. To pick up a copy, stop by the University Police Department or call (210) 436-3725 to request the brochure by mail.

The brochure contains information regarding campus security and personal safety including topics on crime prevention and awareness and police sponsored programs that strengthen the relationship between the St. Mary's Police Department and the University community. Security reports made on-campus or at off-campus/Distance Learning sites over the past three years also are available in the brochure and online as well.

This information is required by law and is provided by the St. Mary's University Police Department.