

POSITION FOR WHICH YOU ARE APPLYING	
Full Time	If PT, Hours available
Part Time	-____-a.m.-____pm.

The City University of New York
 APPLICATION FOR EMPLOYMENT
 SHORT FORM
 COLLEGE _____

Name in Full _____
 Last First Middle
 Home address _____
 No. Street Apt. City State Zip
 Telephone Number (____) _____ (____) _____ S.S NO. ____/____/____
 HomeBusiness

Are you authorized to work in the U.S.? Yes _____ No _____

Under the Immigration and Reform Control Act CUNY's requirement to verify your employment eligibility and identity within three days of reporting to work.

EDUCATION: Please indicate highest equivalent grade of education completed (e.g. GED = 12; BA = 16) List schools attended, beginning with most recent (college, business, high school, vocation, trade etc.)

School Name	Location	Date Entered	Date Left	Total Credits Major Study Completed	Degree and Date Received
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

GED: Year Issued _____ Certificate #: _____

EMPLOYMENT HISTORY. Begin with present or last job and work back for the last 15 years. Attach an extra page, if necessary.

1. Firm Name _____
 Address _____
 Dates Employed From ____/____/____ To ____/____/____ Mo. Yr. Mo. Yr. Job Title _____ Final Base Salary/indicate one
 () Annual \$ _____
 () Weekly \$ _____
 () Hourly \$ _____

Name and Title of Immediate Supervisor _____ Reason for Leaving _____

Briefly describe duties _____

2. Firm Name _____ Address _____
 Dates Employed From ____/____/____ To ____/____/____ Mo. Yr. Mo. Yr. Job Title _____ Final Base Salary/indicate one
 () Annual \$ _____
 () Weekly \$ _____
 () Hourly \$ _____

Name and Title of Immediate Supervisor _____ Reason for Leaving _____

Briefly describe duties _____

3. Firm Name _____ Address _____
 Dates Employed From ____/____/____ To ____/____/____ Mo. Yr. Mo. Yr. Job Title _____ Final Base Salary/indicate one
 () Annual \$ _____
 () Weekly \$ _____
 () Hourly \$ _____

Name and Title of Immediate Supervisor _____ Reason for Leaving _____

Briefly describe duties _____

May we contact the employers listed above prior to your being hired at CUNY? All employment will be verified after hire.

Yes _____ No _____ If no, explain _____

Have you previously been employed by CUNY? No _____ Yes _____. If yes, please give name of college, dates of employment, title(s) and reason for leaving.

Have you ever been discharged or asked to resign from any employment? No _____ Yes _____ If yes, please explain briefly. _____

List any special skills that you possess which you believe will help you perform this job better (e.g. office machines, languages, word processor); be specific: _____

Are you physically, mentally and medically able, with or without reasonable accommodations, to perform fully the essential duties of this job as contained in the job description? Yes _____ No _____

If No, you may still be eligible for appointment to the position. If appointed, be prepared to provide information.

Are you working or do you anticipate working at any other job? Yes _____ No _____

If yes, give name of employer, days and time of work, nature of duties.

Are you currently a full-time student? Yes _____ No _____. If yes, give name of school _____

Credits earned this semester _____.

NOTICE (Please read carefully)

A material false statement or omission willfully or fraudulently made in this application (including attached papers and related interviews) will result in disqualification, even following appointment, and may result in criminal prosecution.

If the position for which this application is submitted requires, as a condition of employment, the applicant to successfully undergo a drug, alcohol, or medical examination, failure to pass such examination or failure to report for such examination shall be grounds for non-appointment or for invalidating the appointment when an offer has been made. Any offer of employment is contingent on successful completion of The City University of New York's total employment screening process, including, when required, receipt of references which the University or College considers satisfactory.

No manager or representative of The City University of New York has the authority to make an offer of employment or to represent a condition of employment which is in violation of the Bylaws Rules, regulations, or collective bargaining agreements governing the administration of the Classified Service of the University. Any representations which are contrary to administrative policies of the University, including those made in writing, are unenforceable. Only the representations made by the President of the College or the College Appointing Officer-- usually the College Personnel Director-- made in writing prior to appointment represent official representations.

The City University reserves the right to revise without notice any personnel policy or practice at any time other than those set forth in the University Bylaw applicable New York State Laws, collectively bargained agreements, and the Rules of the CUNY Civil Service Commission.

Applicant's Certification and Agreement

AFFIRMATION:

I declare and affirm, under penalty of perjury, that I have read and understand the above notice, and that the statements I have made herein are true and correct to the best of my knowledge.

Your Signature _____ Date _____

FOR PERSONNEL OFFICE USE

Date Received _____ Mailed _____ Drop In _____

Typing Test Score _____ Date _____ P.O. Staff Initials _____

Interview Date _____ By _____ Position _____

Interview Date _____ By _____ Position _____

Interview Date _____ By _____ Position _____

**EQUAL EMPLOYMENT OPPORTUNITY
AFFIRMATIVE ACTION EMPLOYER**

(M/F/V/H) OFSR-601 R/6192

A conviction record will not necessarily disqualify you from the position for which you are applying. Each record is reviewed to determine eligibility in accordance with guidelines established by the University and in accordance with New York State law. However, FAILURE TO REPORT THE REQUIRED INFORMATION WILL AUTOMATICALLY DISQUALIFY YOU REGARDLESS OF THE REASON FOR THE OMISSION/FALSIFICATION.

For each conviction or pending charge, you may state facts in favor of your employment on a separate sheet to be attached to this form. These facts will be considered when your application is being reviewed

1. Were you ever convicted of a criminal offense anywhere including felonies, misdemeanors and violations (except for traffic violations or convictions sealed, expunged or set aside under Federal or State law?)

Answer YES or NO

Only a court can determine youthful offender status and seal a conviction. You are not considered a youthful offender just because of your age. If you are unsure whether a conviction was sealed, respond yes to the question and explain below or in an attachment why you are unsure. Most traffic tickets involve infractions or violations, which need not be reported. However, some convictions, such as driving while intoxicated, are classified as misdemeanors or more serious offenses which must be reported. A certificate of Relief from Disabilities does NOT expunge an offense from your record, and the offense must be reported.

2. Are there any criminal charges currently pending against you?

Answer YES or NO

In the space below, please list: a) all felony convictions and felony pending charges regardless of the date received and b) for misdemeanors and violations, all your convictions and pending charges for the past ten years. If "none." write "NONE." You must list convictions even if you plead guilty or received a Certificate of Relief from Disabilities, and regardless of the penalty or sentence you received.

Date of Convic. (Mo/Yr) Offense of which you were convicted Name/location of court Disposition including incarceration

Blank lines for listing convictions and pending charges.

WARNING: FALSIFYING OR OMITTING ANY MATERIAL REQUIRED ON THIS FORM WILL RESULT IN YOUR DISQUALIFICATION AND YOUR REMOVAL FROM CUNY SERVICE AND MAY RESULT IN CRIMINAL PROSECUTION. YOUR STATEMENTS WILL BE CHECKED USING COURT RECORDS. REMEMBER TO RESPOND TO BOTH QUESTIONS AND FILL IN THE INFORMATION REQUESTED ABOVE.

DECLARATION FOR SECTIONS J AND K ABOVE

I, (signature), residing at (address) do declare that all the statements contained herein are true and correct to the best of my knowledge. Date:

To be completed by College Personnel Staff

Candidate College Date CSC Title Transf. Action (Appt., Reinst.) Status Completed by Title