HOLY NAMES UNIVERSITY FACULTY EMPLOYMENT APPLICATION

Holy Names University is an Equal Employment Opportunity employer. Hiring decisions are made without regard to an applicant's race, color, creed, sex, religion, marital status, age, national origin or ancestry, physical or mental disability, medical condition including genetic characteristics, actual or perceived sexual orientation or veteran status. No question is intended to secure information to be used for such discrimination.

PERSONAL INFORMATION

Name: Last First Middle	Telephone Number: Home Alternate	
Present Address:	Email Address:	
Position Applying for:	Available Start Date:	Desired Salary:

How did you learn about the position for which you are applying?

☐ Online Posting ☐ HNU Site ☐ HNU Employee ☐ Referral Other _____

GENERAL INFORMATION

	Yes	No
1. Can you, after employment, submit verification of your legal right to work in the United States?		
2. Have you ever applied to or worked for Holy Names University previously? *(If yes, please indicate date(s) and position(s) in the comment space below).*		
3. Do you have any friends or relatives employed by Holy Names University? *(If yes, please indicate name(s) and relationship(s) in the comment space below).*		
4. Have you used another name while working or attending school? *(If yes, please indicate name(s) in the comment space below).*		
5. Can you perform the essential functions of the position for which you are applying, with or without reasonable accommodation? *(If a reasonable accommodation is required, please detail in the comment space below. Note, we comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees. Hire may be subject to passing a medical examination, and to skill and agility tests.*		
6. Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? *(If yes, please explain in the comment space below. Exclude any sealed, expunged, or statutorily eradicated convictions. Convictions for marijuana-related offenses that are more than two (2) years old need not be listed). A Conviction will not necessarily disqualify you for employment).*		

Comments:

EDUCATION

Please attach curriculum vitae.

REFERENCES

List below three (3) persons not related to you, who have knowledge of your work performance within the last three (3) years and who we may contact

1.	**Name**	**Occupation**	**Relationship to You**
	Address	**Telephone Number**	**Email Address**
2.	**Name**	**Occupation**	**Relationship to You**
	Address	**Telephone Number**	**Email Address**
3.	**Name**	**Occupation**	**Relationship to You**
	Address	**Telephone Number**	**Email Address**

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ Initials

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to confer preference or entitlement to renewal of part-time appointment, nor to receive consideration, preference or entitlement to any regular faculty appointment, and does not count as service for purposes of any regular appointment.

_____ Initials

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge including all information indicated on my attached C.V. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ Initials

I hereby authorize Holy Names University to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the University any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the University, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ Initials

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the University, I am entitled to copies of any such public records obtained by the University unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

☐ I waive receipt of a copy of any public record described in the paragraph above.

_____ Date

_____ Applicant's signature

HOLY NAMES UNIVERSITY
Since 1868

APPLICANT EQUAL EMPLOYMENT OPPORTUNITY SELF IDENTIFICATION FORM

Holy Names University is an equal opportunity employer. We are required to maintain and monitor an equal opportunity and affirmative action program, and report the results to the federal government. By identifying your sex, race or ethnicity, and disability status on this form, you help us collect information needed to comply with these reporting requirements.

Your submission of this information is voluntary. The information you provide in this form will not be used to determine your eligibility or qualification for employment.

The information you provide is used to evaluate whether we are in compliance with laws that prohibit the discrimination or harassment of any person seeking employment on the basis of sex, race, color, national origin, or physical disability.

When we receive this form, we will immediately place it in a confidential file separate from your application. If you wish, you may mail this form to us in separately from your application.

Name (Last, First, Middle Initial)	Date	Position You Applied For

RACE/ETHNICITY
Your response to this survey is voluntary. Please read each section thoroughly and answer each question to the best of your ability.
Please check one space only.

☐ Hispanic or Latino- A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

For Persons of Non-Hispanic Race/Ethnicity:
Please check one space only.

☐ American Indian or Alaska Native - A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.
☐ Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
☐ Black or African American - A person having origins in any of the black racial groups of Africa.
☐ Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
☐ White - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
☐ Two or More Races

GENDER/SEX
☐ Male ☐ Female

DISABILITY STATUS
☐ Yes ☐ No
A person is disabled if he or she has a physical or mental impairment that substantially limits one or more major life activities.

RECRUITMENT SOURCE
How did you learn about the position for which you are applying?

☐ Published advertisement (specify publication)
☐ Professional organization
☐ Holy Names University position announcement
☐ General inquiry
☐ Friend or colleague
☐ Other (specify)