



**ALVERNIA**  
**UNIVERSITY**

**400 St. Bernardine Street**  
**Reading, PA 19607**  
**(610) 796-8200**  
**www.alvernia.edu**

## Employment Application

**Alvernia University** is an equal opportunity employer and does not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Human Resources Department.

Date: \_\_\_\_\_

Applicant name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Position(s) Applied For: \_\_\_\_\_

Type of Employment Desired: \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Temporary

Date Available to Begin Work \_\_\_\_\_ Salary Requirements \_\_\_\_\_

Hours Available to Work \_\_\_\_\_

Do you have any objection to working overtime if necessary? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you travel if required by this position? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been previously employed by our organization? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, what dates \_\_\_\_\_

Can you submit proof of legal employment authorization and identity? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you are under 18, can you furnish a work permit if it is required? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been convicted of a felony, or within two years a misdemeanor, which resulted in imprisonment?  
(A conviction will not necessarily disqualify you from the job requested.) \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please give dates and details: \_\_\_\_\_

Are there any criminal charges pending against you at this time? If so, please give details on a separate sheet of paper. \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have any relatives currently working for us? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, name and relationship \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

## Educational History

	HIGH SCHOOL	TECHNICAL SCHOOL	UNIVERSITY	OTHER
School Name and Location				
Years Completed	9 10 11 12	1 2	1 2 3 4	1 2 3 4
Diploma Degree	Yes No	Yes No	Yes No	
Major Course(s) of Study/Degree Earned				

## References

List three (3) references names and telephone numbers (references should be business-related):

NAME	TITLE/COMPANY NAME	PHONE NUMBER
		( )
		( )
		( )

## Employment History

Provide the following information of your past and current employers, assignments, or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	TELEPHONE # ( )	DATES EMPLOYED		TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		TO	FROM	
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR & TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY ENDING		
MAY WE CONTACT FOR REFERENCE?		\$	PER	

EMPLOYER	TELEPHONE # ( )	DATES EMPLOYED		TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		TO	FROM	
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR & TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY ENDING		
MAY WE CONTACT FOR REFERENCE?		\$	PER	

### Employment History - Continued

EMPLOYER	TELEPHONE # (    )	DATES EMPLOYED		TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		TO	FROM	
ADDRESS		HOURLY RATE/SALARY STARTING		
STARTING JOB TITLE/FINAL JOB TITLE		\$	PER	
IMMEDIATE SUPERVISOR & TITLE		HOURLY RATE/SALARY ENDING		
REASON FOR LEAVING		\$	PER	
MAY WE CONTACT FOR REFERENCE?				

**Comments** (including explanation of any gaps in employment) \_\_\_\_\_

Within the last five (5) years, have you been discharged or asked to resign? If so, give details on a separate sheet of paper. For each case, provide name and address of employer, approximate date and reasons for dismissal. \_\_\_\_\_ Yes \_\_\_\_\_ No

### Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

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**Experience and Qualifications – Driver's Record (complete if applying for a position requiring use of a company vehicle).** List any licenses that you had for the past ten years (attach a separate sheet of paper if necessary)

DRIVER'S LICENSE NO.	STATE ISSUED	CLASS TYPES	EXPIRATION DATE

Have you ever been denied a license, permit or privilege to operate a motor vehicle? \_\_\_\_\_

Has any license, permit or privilege ever been suspended or revoked? \_\_\_\_\_

(If you answered yes to either question above, please provide details on an attached paper.)

I hereby authorize Alvernia University to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability Alvernia University and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

I understand that Alvernia University will not be bound by offers of employment other than those made in official offer letters.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

If offered a position, I understand that I will be required to submit to a pre-employment background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in Alvernia University rescinding the employment offer or terminating your employment.

For some positions, after an offer of employment is made, the University as a condition of employment may require a pre-employment medical examination or immunization(s) when it is relevant to the job. These examinations are arranged by and at the expense of the University. If a pre-employment medical examination or immunization(s) is required, it will be stated in the recruitment advertising. By applying for a specific job, you acknowledge your understanding and agreement that failure to successfully complete a required post-offer, pre-employment medical examination or immunization(s) will result in Alvernia University rescinding the employment offer or terminating your employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_