

EMPLOYMENT APPLICATION

EQUAL EMPLOYMENT OPPORTUNITY: Hollins University is committed to a policy of providing equal employment opportunity without discrimination because of race, color, religion, sex, age, disability, genetic information, national or ethnic origin, veteran status, or sexual orientation. This policy applies to all terms and conditions of employment, including, but not limited to hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

Current Date: _			Date Available	for Work:							
				PERSON	AL DATA						
Name: (Las) (First) (Middle)				Telephone:						
Present Address: (No.) (Street) (City) (State)				(Zip)	(Zip) E-mail Address:						
Position Applying For:							Salary Requirement: \$				
Full-Time Part-Time Temporal	Part-Time contingent upon satisfactory proof of my eligibility			Are you a previous applicant?	5	Are you a previous employee?				oo you have reliable ransportation to work?	
Please check to indicate source of referral: Advertisement - Name of Publication and/or Web Site: Personal - Name of Employee or Other Person:					Other than traffic violations, have you ever been convicted of a crime? * Yes No If yes, please describe:						
EDUCATION AND TRAINING											
School	Name and Address of School			Course of Study			Circle Last Did You Diplom ar Completed Graduate? Degree				
High						1	2	3	4	Yes ☐ No ☐	
College						1	2	3	4	Yes 🗆	
Other (Specify)						1	2	3	4	Yes 🗆	
KNOWLEDGE, SKILLS, AND ABILITIES											
What knowledge, special, technical, and/or individual abilities do you have which prepare you for the position you have applied for (list administrative/managerial/mechanical/technical skills and/or certifications)?			Computer Skills:								

^{*} Conviction of a crime will not automatically disqualify you for employment. Hollins University will consider the nature and recency of the conviction and the nature of the position applied for, among other factors.

EMPLOYMENT HISTORY

Start with most recent position, and provi A resume providing this in										
	Dates (month/year)		Position Title and			Salary al or hourly)				
Name and Address of Company	From	То	Duties Performed (please include both)		Starting		Reason for Leaving			
	110111	10			Otarting	Enaing				
	\dashv									
Supervisor:										
Telephone:										
	Dates (month (con)		Position Title and			Salary	Reason for Leaving			
Name and Address of Company		(month/year)		Duties Performed (please include both)		al or hourly)				
	From	То	(ріоцоо		Starting	Ending				
Supervisor:										
Supervisor.										
Telephone:										
		Dates (month/year)		Position Title and		Salary al or hourly)				
Name and Address of Company	From	То		Performed include both)	Starting		Reason for Leaving			
			!							
Supervisor:										
Telephone:										
		MILI	TARY SERVI	CE RECORD						
Date of Service:	Br	Branch of Service:				Rank at Discharge:				
List Duties (include schools and training)):									
	(Profession	onal and p	REFEREN personal – not ab	CES ove supervisors or	relatives)					
Name	Relation	ship to Re	ference Phone Numb		mber	E-m	ail Address			
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APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete, and I authorize Hollins University to verify their accuracy and to obtain reference information on my work performance and attendance. I hereby release Hollins University from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that falsified statements of any kind, or omission of facts called for on this application, shall result in rejection of my application for employment and/or termination of my employment. I further understand that the policies, rules, and regulations of employment, or anything said during the interview process or after, do not constitute a contract of employment for a specific period of time. I understand that any employment is for an indefinite duration, and is at will. I further understand that either I or the employer may terminate my employment for any reason, at any time, with or without notice, and/or with or without cause.

Applicant's Signature:	Date:
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