APPLICATION FOR EMPLOYMENT INSTRUCTION SHEET

Thank you for your interest in Navarro College. Please take a moment to <u>read the following instructions</u> before completing this application. Please follow the directions as requested.

- Type or legibly print all requested information.
- All information requested on the application <u>must be filled out completely</u>. Incomplete applications <u>WILL NOT</u> be considered.
- Please include in your application packet the following items:
 - o <u>Cover Letter</u>. The cover letter is to simply state the <u>specific position of interest</u> and provide a quick synopsis of your qualifications.
 - <u>Resume</u> A current resume should accompany each application.
 - <u>Employment History</u> A current mailing address and current telephone number must be provided for each employer. This information is used in contacting references and verifying past employment. Incomplete reference information will delay processing an application and may void an application.
 - <u>Transcripts</u> A copy of transcripts must be submitted if applying for a position requiring a degree (i.e. Associates, Bachelors, or Masters). Official transcripts will be required if employment offer is made.

You may deliver, mail or email the completed application to:

Marcy Ballew
Vice President of Human Resources
Navarro College
3200 West 7th Avenue
Corsicana, TX 75110

human.resources@navarrocollege.edu

Office Hours: 8:00 a.m. to 5:00 p.m. (903) 875-7336 (800) NAVARRO

> If applying for more than one position a SEPARATE APPLICATION PACKET is required for <u>each</u> position.

NAVARRO COLLEGE

EMPLOYMENT APPLICATION

We consider applicants for all positions without regard to race, color, national origin, age, religion, gender, marital or veteran status, the presence of a medical condition, disability, or any other legally protected status.

POSITION INFORMATION					Are you a current NC employee? Yes No Full Time start date with NC:			
Enter below the specific job vacancy title and department for which you are applying.								
Job Title:				Dep	t. Nam	e:		
	PERSONAL INF	ORMA	TION		Ty		e Work	Campus preference
							time _	Corsicana campus
LAST NAME		EIDCT I	MAME	MIDD	<i>1 E</i>	Part- Tem	porary _	Waxahachie campus Midlothian campus
LAST NAME		FIRST NAME			LE		stitute _	Mexia campus
Other last names used:	Other first n	Other first names used:			·	SOCIAL	SECURITY NUME	RFR - last 4 dinits
Other last names asea.	Other mat m	і пізі пашез изей.		Other usea			+** _ ** _	
9	Street Address				City	1	State	Zip Code
								·
Home Telephone Number	Cell Phone Num	ber	Business Phor	ne Number	Τ		Email Address	
,								
Have you ever been convicted of	f, plead guilty or no c	ontest fo	nr a felony? Ye	s No (D	Does not	necessarily	disqualify). Give d	ate, location, and offense.
Are you related to any Navarro C nature of relationship:	College employee or E	Board of	Trustee member?	Yes _	<i>No</i>	If yes, na	ame of employee/	Board member and
Are you prevented from lawfully (Proof of citizenship or immigration)				isa or Immigr	ration Sta	atus? \	/es No	
EDUCATION AND TRAINING Providing this information means that you give Navarro College permission to verify your educational history. Also, please attach copies of transcripts to this application. Applications				ns	Please list the most recent college/university first.			
without transcripts will be considered incomplete. College, University, High School or Technical School Attended		Dip	Diploma/Degree Type		Major/Minor		Graduation Date	Hours completed
LIST YOUR KNOWLEDGE, SKILLS AND QUALIFICATIONS APPLICABLE TO THIS POSITION:			office	Examples: Range of computer skills; knowledge of software programs, office technology skills, language skills, and any other special skills you possess.				

Page 2 Employment Application 2017

		ENT HISTORY ecent work experience.	This section must be completed for all positions even though a resume must be included in the application packet. Applications without a resume will be considered as incomplete.			
Date Started	Date Left	Name of Organization		Phone Number		
Name & Title of Su	upervisor	Your Title Upon Leaving	Your Title Upon Leaving			
Description of Dut	ies:					
Reason for Leaving	g:		May we contact this employer? Yes No			
Date Started	Date Left	Name of Organization		Phone Number		
Name & Title of Su	l Ipervisor	Your Title Upon Leaving		Ending Salary		
Description of Dut	ies:					
Reason for Leaving:			May we contact this employer? Yes No			
Date Started	Date Left	Name of Organization		Phone Number		
Name & Title of Supervisor Your Title Upon Leaving			Ending Salary			
Description of Dut	ies:					
Reason for Leaving	g:		May we contact this employer? Yes No			
REFERENCES			In this section, please list three professional/business references in addition to supervisors listed above. Do not include personal friends or family members.			
Complete	Name	Relationship	Occupation	Telephone		
How did you hear Newspaper	about Navarro Colleg Other:	ge? higheredjobs.com NC w	veb site NC employed	e Family/friend		
in good faith. I u		offer of employment tendered to me		e best of my knowledge and are made agreement to abide by the district		
Signature:			Date:			
Printed Name:						

(To be completed by Faculty, Administrative and Paraprofessional applicants.) Please list professional organizations of which you are currently a member. Please list your professional recognitions and any articles published. Faculty only: Please write a brief statement of your teaching philosophy including your view of the role of the community college. (Use additional pages if necessary.)

Addendum to Application for Faculty and Professional Positions

EMPLOYMENT INQUIRY RELEASE

(Please read the following statement carefully.)

This document authorizes the Department of Human Resources of Navarro College to make investigative background inquiries in connection with my possible employment with Navarro College.

- I understand these background inquiries may include but will not be limited to: employment, educational, consumer, criminal, driving and other reports.
- I understand these background inquiries may also include information regarding: character, work habits, work performance, experience, and reasons for termination of past employment.
- I understand that Navarro College may be requesting information from various federal, state, and other agencies that maintain records concerning past activities relating to driving, credit, criminal, insurance, as well as other experiences.

I authorize, without reservation, any part or agency contacted by the Department of Human Resources of Navarro College to furnish the above-mentioned information.

Your name:	Social Security Number: *** - ** -		
(Please Pfint)			
Current street address:			
City:	State:	Zip Code:	
Date of birth:			
Driver's License Number:		Issuing State:	
Your signature:			
	(Original signature must be kept in ou	r applications file.)	
Position for which applying:		Date:	

VOLUNTARY APPLICATION IDENTIFICATION FORM

Navarro College is an Equal Opportunity/Affirmative Action Employer.

The information below is needed to measure the effectiveness of our recruitment efforts and is in conformity with federal government guidelines, which require us to compile statistical information about applicants for employment. You are not required to furnish this information, but are encouraged to do so. The law provides that an employer may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under federal regulations, this employer is required to note race and sex on basis of visual observation or surname.

This Voluntary Application Identification Form will be kept in a confidential file separate from the Application for Employment.

Name:	
Positio	n for which you are applying:
Please	check one of the following statements:
	I wish to furnish this information.
	I DO NOT wish to furnish this information.
Please	check the appropriate space:
	Male
	Female
Race/E	Ethnic Category (Please select the racial/ethnic category or categories with which you most closely identify. Check as many as apply.):
	Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
	White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
	American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains 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. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."
	Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I,, ackr	, acknowledge that a Computerized Criminal			
APPLICANT or EMPLOYEE NAME (Please print)				
History (CCH) check will be performed by accessing the Texas Department of Public Safety Secure				
Website and will be based on <u>name and DOB</u> identifiers I supply. (This is not a consent form.) Authority				
for this agency to access an individual's criminal history data may be found in Texas Government Code				
411; Subchapter F.				
Name-based information is not an exact search and only fingerprint record searches represent				
true identification to criminal history, therefore the organization conducting the criminal history check is				
not allowed to discuss with me any criminal history reco	ord information obtained using this method. The			
agency may request that I have a fingerprint search per	formed to clear any misidentification based on			
the result of the <u>name and DOB</u> search. Once this	process is completed the information on my			
fingerprint criminal history record may be discussed with	ı me.			
In order to complete the process I must make a	an appointment with the Fingerprint Applicant			
Services of Texas (FAST) as instructed online at www	vw.txdps.state.tx.us /Crime Records/Review of			
Personal Criminal History or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and				
complete set of fingerprints, request a copy be sent to the	agency listed below, and pay a fee of \$24.95 to			
the fingerprinting services company.				
(This copy must remain on file by your agen	ncy. Required for future DPS Audits)			
·	•			
Signature of Applicant or Employee	Di Di			
	Please: Check and Initial each Applicable Space			
Date	CCH Report Printed:			
	YES NO initial			
Agency Name (Please print)				
	Purpose of CCH:			
Agency Representative Name (Please print)	Empl Vol/Contractor initial			
	Date Printed: initial			
Signature of Agency Representative	Destroyed Date: initial			
	Retain in your files			
Date				

Rev. 09/2013