CARROLL COMMUNITY COLLEGE

For HR Use Only
Interview Date: _____
Interview Time: _____
Room: _____

Employment Application

I. Applicant Information

Date of Application:_____ Name:_____
Last *First* *MI*

Street Address:_____

City:_____State:_____ Zip:_____

Cell Phone:_____ Home Phone:_____

Email:_____ Position desired:_____

Classification desired: ☐ Full Time (Professional, Support or Faculty) ☐ Part Time/Hourly

☐ Adjunct Faculty (☐ Continuing Education & Training OR ☐ Credit Faculty)

Minimum annual salary required:$_____ Date available to begin work: _____ / _____ / _____

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Will you now or in the future require sponsorship for employment visa status? ☐ Yes ☐ No

Have you ever been suspended, discharged, or asked to resign from a job? ☐ Yes ☐ No If yes, explain:

Have you ever worked for Carroll Community College? ☐ Yes (dates:_____ / _____ / _____ to _____ / _____ / _____) ☐ No

II. Education

Résumé cannot substitute for information required below.

	Name of Institution Attended & City, State	Degree/Certificate Pursued	Field of Study or Major/Minor	Diploma/Degree or Certificate Completed?
High School/GED		N/A		☐ Yes ☐ No (# of credits __)
Trade School				☐ Yes ☐ No (# of credits __)
College		☐ Associate ☐ Bachelor's ☐ Master's		☐ Yes ☐ No (# of credits __)
College		☐ Associate ☐ Bachelor's ☐ Master's		☐ Yes ☐ No (# of credits __)
Post-Graduate		☐ _____ ☐ _____ ☐ _____		☐ Yes ☐ No (# of credits __)

III. Employment

Résumé cannot substitute for information required below. See Section IV for post-secondary teaching experience.

List present or most recent position first. Include additional employers on an attached sheet of paper.

May we contact your current employer? ☐ Yes ☐ Call Me First ☐ N/A

Company Name:_____

Company Address:_____

Supervisor's Name and Title:_____

Supervisor's Phone Number:_____

Dates of Employment:_____ / _____ / _____ to _____ / _____ / _____Your Title:_____

Status: ☐ Full time ☐ Part time ☐ Other _____ Hours worked per week:_____

Duties:

Reason for Leaving:_____

Company Name:_____

Company Address:_____

Supervisor's Name and Title:_____

Supervisor's Phone Number:_____

Dates of Employment:_____ / _____ / _____ to _____ / _____ / _____Your Title:_____

Status: ☐ Full time ☐ Part time ☐ Other _____ Hours worked per week:_____

Duties:

Reason for Leaving:_____

Company Name:_____

Company Address:_____

Supervisor's Name and Title:_____

Supervisor's Phone Number:_____

Dates of Employment:_____ / _____ / _____ to _____ / _____ / _____Your Title:_____

Status: ☐ Full time ☐ Part time ☐ Other _____ Hours worked per week:_____

Duties:

Reason for Leaving:_____

IV. Teaching Experience (if applicable)

Résumé cannot substitute for information requested below.

List present or most recent position first. Include additional employers on an attached sheet of paper.

May we contact your current employer? ☐ Yes ☐ Call Me First ☐ N/A

Name of School/Institution:_____

School/Institution Address:_____

Supervisor's Name and Title:_____

Supervisor's Phone Number:_____

Dates of Employment:_____ / _____ / _____ to _____ / _____ / _____Your Title:_____

Status: ☐ Full time ☐ Part time ☐ Other _____ Hours worked per week:_____

Duties:

Reason for Leaving:_____

Name of School/Institution:_____

School/Institution Address:_____

Supervisor's Name and Title:_____

Supervisor's Phone Number:_____

Dates of Employment:_____ / _____ / _____ to _____ / _____ / _____Your Title:_____

Status: ☐ Full time ☐ Part time ☐ Other _____ Hours worked per week:_____

Duties:

Reason for Leaving:_____

Name of School/Institution:_____

School/Institution Address:_____

Supervisor's Name and Title:_____

Supervisor's Phone Number:_____

Dates of Employment:_____ / _____ / _____ to _____ / _____ / _____Your Title:_____

Status: ☐ Full time ☐ Part time ☐ Other _____ Hours worked per week:_____

Duties:

Reason for Leaving:_____

V. Special Skills/Qualifications

List specific computer software experience (including tasks performed):

List special equipment experience:

If applying for faculty or adjunct position, describe areas of teaching specialization:

List professional licenses and certifications held:

List honors (recognitions, fellowships, awards, publications, exhibits) and professional memberships:

List any other skills or abilities that make you particularly qualified for the position for which you are applying:

VI. Certifications/Disclosures

Applicant Certification:
To the best of my knowledge, the information that I have provided on this application and throughout the recruitment process is correct and complete. I understand that any misrepresentation or omission of material, or reference unsatisfactory to the College, are sufficient cause for rejection of this application or termination of employment without notice. I authorize Carroll Community College to make all necessary and appropriate investigations to verify the information contained herein, including contacting my past employers. I agree that all policies and procedures affecting employment at the College shall be made part of any appointment of employment

Signature of Applicant:_____ Date:_____ / _____ / _____

Polygraph Certification:
Under Maryland Law, an employer may not require or demand any applicant for employment or prospective employment or any employee to submit to or take a polygraph, lie detector, or similar test or examination as a condition of employment or continued employment. Any employer who violates this provision is guilty of a misdemeanor and subject to fine not to exceed $100.00.

Signature of Applicant:_____ Date:_____ / _____ / _____

Pursuant to 20 United States Code section 1092(f), the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, Carroll Community College's annual security report containing policy statements and crime statistics can be found at www.carrollcc.edu/securityreport.pdf. Hard copies of this Report are also available on campus in the Office of Campus Police, Room A137, as well as the College's Information Center. You may also request one by contacting the Office of Campus Police at 410-386-8600.

Carroll Community College is an at-will employer. Employment is on an at-will basis and can be terminated at the will of either party. This application is not intended to and does not create a contract or offer of employment.

Carroll Community College is committed to fostering a welcoming environment for all. We are proud to be an equal opportunity employer.

In accordance with the Americans with Disabilities Act, please advise us if you wish to request any accommodation to complete the application/selection process.