



Application for Employment

An Equal Opportunity Employer

General Information (Please print or type)

Last Name		First Name		MI
Street Address				
State	Zip Code	Home Phone	Are you eligible to work in the USA?	
Position Applying For		Wage Expected	Date Available	
Have you ever been employed with the University of Riverside or on of its subsidiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, state years/months of employment, last position held, supervisors name and your name while employed, if different from present name.				
How did you hear about this position?				
Referred by University of Riverside Employee (Provide Name)		Newspaper, Radio or Internet Ad	Other	
Do you have any friends or relatives currently employed by University of Riverside? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Name		Relationship	Department	
		Relationship	Department	

Employment Record (Show last job first – must cover 5 years including periods of unemployment – “See Resume” is not acceptable)

Company Name	Phone	Start Date	Job Title & Job Responsibilities	
Street Address		Date Left		
City	State	Zip Code		
Reason for Leaving			Supervisor	

Company Name	Phone	Start Date	Job Title & Job Responsibilities	
Street Address		Date Left		
City	State	Zip Code		
Reason for Leaving			Supervisor	

Company Name	Phone	Start Date	Job Title & Job Responsibilities	
Street Address		Date Left		
City	State	Zip Code		
Reason for Leaving			Supervisor	



Employment Record *continued*

Company Name	Phone	Start Date	Job Title & Job Responsibilities
Street Address		Date Left	
City	State	Zip Code	
Reason for Leaving			Supervisor

Have you ever been convicted of a Felony? Yes No

If yes, nature of conviction
Have you ever been convicted, pled guilty, pled no contest, or judicially determined to have committed a crime, fraud, or other material violation involving the acquisition, use or expenditure of federal, state or local government funds? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain

U.S. Military Service Record

Branch	Entry Date	Discharge Date	Rank or Specialty	Reserve or Draft Status

School & Educational Record

School Name	City and State	Major Field of Study	Grade/Years Completed	Type of Degree Awarded	
High School				Mark One	<input type="checkbox"/> Diploma <input type="checkbox"/> GED
College					

PLEASE READ CAREFULLY

<p>My SIGNATURE INDICATES I understand and agree to all conditions listed below:</p> <ul style="list-style-type: none"> I certify that all of the foregoing statements are true and correct to the best of my ability. I understand that misrepresentation or omission of facts is cause for denial of employment or dismissal I understand that inquiries will be made of former employers regarding work performance and educational institutions regarding transcripts. I release from liability all persons, companies, corporations and education institutions supplying such information. Additionally, I indemnify the University of Riverside and its subsidiaries against any liability which might result from making such investigation. I understand that if an employment relationship is established I have the right to terminate my employment at any time and for any reason, the University of Riverside, and its subsidiaries retain a similar right. 	
Signature	Date