



HUMAN RESOURCE OFFICE

# EMPLOYMENT APPLICATION

## Support Staff • Maintenance

### Delta College

1961 Delta Road, University Center, MI 48710  
 (989) 686-9107 ♦ (989) 686-0755/Fax  
 Web Site: www.delta.edu/humres

OFFICE USE ONLY

PLEASE PRINT OR TYPE

### PERSONAL DATA

Name (Last)	(First)	(Middle)	Today's Date
Address (City) (State) (Zip Code)			Area Code & Phone No. ( )
Are you legally eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Proof of citizenship or immigration status will be required upon employment.</i>		Have you ever been employed by Delta College? <input type="checkbox"/> Yes <input type="checkbox"/> No If "YES", state where and dates _____	
E-mail Address			
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If "YES", please explain: _____			
Are you related to anyone employed at Delta College? <input type="checkbox"/> Yes <input type="checkbox"/> No If "YES", Who? _____ Relationship? _____			

<b>POSITION APPLYING FOR</b> _____  Date Available _____  I am seeking: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Either
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**WORK EXPERIENCE DURING THE LAST TEN YEARS.** Start with last employer and attach a list of any additional employment as necessary.

Organization Name and Address Include City and State	Full or Part Time	From Mo./Yr.	To Mo./Yr.	Monthly Earnings	Nature of Work and Name of Immediate Supervisor	Reason For Leaving

**If any of your employment records are under a different name, please list name used** \_\_\_\_\_

Please give below additional information regarding your education or experience that you feel would be helpful to us in considering your application. Attach a list of additional information if necessary. \_\_\_\_\_

## EDUCATION

	Name of School	Degree Received	Major/Minor
High School Attended			
Trade Schools/Colleges or Universities Attended			
Apprenticeship	Agency:	Occupation:	

## REFERENCES (Give three professional work related references.)

Name	Address	Telephone Number	Business	Years Known
		(     )		
		(     )		
		(     )		
		(     )		
		(     )		

**ALL SECTIONS OF THIS APPLICATION MUST BE COMPLETED. DO NOT ATTACH A RESUME IN LIEU OF COMPLETING THIS APPLICATION.**

I hereby certify that the information given by me in this application is true, accurate, and complete. I understand that if I have given any false information on this application, or if I have omitted any material facts, I may be disqualified from employment with Delta College, or if hired, I may be discharged immediately upon discovery of such false statements or omissions, regardless of how much time has passed between the date of my hire and the discovery of the misrepresentations or omissions. In addition, I authorize and consent to a thorough investigation of my past employment and will fully cooperate in any such investigation. In consideration of this application for employment, I hereby release, save and hold harmless Delta College, its board of trustees, elected and appointed officials, employees, agents, and anyone else working on behalf of Delta College, as well as all of my current and past employers and their boards, officers, employees, agents and others working on their behalf from any and all liability or responsibility arising from any disclosure made or obtained pursuant to this authorization, or from the failure to disclose information. I agree that any action or suit against Delta College arising out of my employment or termination of employment, including, but not limited to, claims arising under State or Federal civil rights statutes, must be brought within 180 days of the event giving rise to the claims or be forever barred. I waive any limitation periods to the contrary.

EQUAL OPPORTUNITY EMPLOYER

**"READ CAREFULLY BEFORE SIGNING**

I agree that any claim or lawsuit relating to my service with Delta College or any of its divisions must be filed no more than six (6) months after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary."

**Signature** \_\_\_\_\_ **Print Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**No application will be considered unless it is signed by applicant.**

When completed and signed, please return to:

**Delta College, Human Resource Office, J101, 1961 Delta Road, University Center, MI 48710 or fax to Human Resources Employment at (989) 686-0755.**

## POLICY STATEMENTS FOR EMPLOYMENT APPLICATION

### DRUG-FREE WORKPLACE ACT

Delta College, in compliance with the *Drug-Free Workplace Act of 1988, P.L. 100-690*, certifies that we will maintain a drug free workplace by prohibiting the unlawful manufacture, distribution, dispensing, possession or use of any controlled substance by any employee in the workplace and will enforce strict sanctions, up to and including discharge, for any violation of this policy.

***Delta College is a Tobacco Free/Smoke Free environment.***  
***(Policy can be found on-line at: <http://www.delta.edu/TobaccoFree>)***

### IMMIGRATION REFORM AND CONTROL ACT

Delta College is required by law to verify all new employee's eligibility for employment in the United States. **A new employee must provide the College with documentation of his/her authorization to work and proper identification within the first three days of employment. Employment will be terminated if appropriate documentation is not submitted.** A list of acceptable documents are available in the Human Resources Department, J101, 1961 Delta Road, University Center, MI 48710.

In order to track our recruitment sources, please indicate when you first learned about the position:

- A) Advertisement? \_\_\_\_\_ Please give publication \_\_\_\_\_
- B) Internet? \_\_\_\_\_ Please give internet address \_\_\_\_\_
- C) Posting/Announcement? \_\_\_\_\_ When? \_\_\_\_\_
- D) Other? \_\_\_\_\_

### EQUAL OPPORTUNITY STATEMENT:

It is the policy of Delta College not to discriminate in employment, education, public accommodation or public service on the basis of religion, race, color, national origin, age, sex, marital status, sexual orientation, gender identity, height, weight, arrest record, veteran status, disability, or other classifications as required by applicable U.S. federal, state or local law. Direct inquiries to the Equity/Compliance Officer, Delta College, 1961 Delta Road, Office J101, University Center, MI 48710, telephone 989-686-9122, or email: [equityoffice@delta.edu](mailto:equityoffice@delta.edu)

This application is considered current only for the position applied for as listed on the front of this application. If you are still interested in other employment, it will be necessary for you to reapply by filling out a new application. A person with a disability or handicap requiring accommodation for completing the application process should notify Human Resources as soon as possible.

**Delta College**  
**PRE-EMPLOYMENT CERTIFICATION/RELEASE**



I understand and agree to the fact that employment at Delta College is conditional upon a review of my qualifications, references, etc. I authorize Delta College, or its research agent, to request and obtain verification that the information given by me on my application, resume or vita and in this Pre-Employment Certification/Release (hereinafter, "Release") is true, accurate and complete. I further authorize Delta College to update such verification at any time during my employment as may be deemed necessary. I understand that such verification may include but may not be limited to background information pertinent to the position for which I have applied, including my character, reputation, consumer reports, credit reports, verification of licensure, verification of academic records, verification of employment, and investigation of criminal history (collectively referred to as "background information").

I further understand that if I refuse to sign this Release or have given any false information or omitted any pertinent facts on my application, resume, vita or Release, I may be disqualified from employment with Delta College, or, if hired, I may be discharged immediately upon discovery of such false statements or omissions.

I authorize my current and all previous employers, academic institutions and other references to release, on a confidential basis, any background information they may have concerning me, including any information contained in my personnel record, academic record or otherwise known by them to Delta College. I waive my right to prior written notice of disclosure of my personnel record information, including disciplinary reports, letters of reprimand and other disciplinary action by my current and former employer(s) and by Delta College at some point in the future. I specifically release Delta College and any current or former employer, as well as, all agents, representatives, employees, officers and/or directors of Delta College and such employers from any liability whatsoever which arises in connection with any inquiries about me and/or disclosures of background information about me.

I further understand that this information will become part of my personnel record at this employer and will be held in the confidence accorded all such records.

I acknowledge that I have read and understand this information, and the rules governing its collection and use, are pursuant to the Fair Credit Reporting Act as amended by the Consumer Credit Reform Act of 1996, and that any adverse action based on this information will be communicated to me in accordance with the Act.

**FOR IDENTIFICATION PURPOSES**

Please Print Full Name \_\_\_\_\_

Other or Former Names (maiden) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Driver's License State \_\_\_\_\_ Driver's License # \_\_\_\_\_

**Complete the following only if the position requires a driver's license:**

Has your driver's license ever been revoked, suspended, restricted?  Yes  No  
If **Yes**, for what reason and for how long? \_\_\_\_\_

List any moving violations during the last three (3) years: \_\_\_\_\_

**Please list current and previous counties of residence for the past seven (7) years:**

County \_\_\_\_\_, State \_\_\_\_\_ County \_\_\_\_\_, State \_\_\_\_\_

County \_\_\_\_\_, State \_\_\_\_\_ County \_\_\_\_\_, State \_\_\_\_\_

County \_\_\_\_\_, State \_\_\_\_\_ County \_\_\_\_\_, State \_\_\_\_\_

County \_\_\_\_\_, State \_\_\_\_\_ County \_\_\_\_\_, State \_\_\_\_\_

**EDUCATIONAL DATA**

Highest Degree/Diploma Attained \_\_\_\_\_ Year Received \_\_\_\_\_

School/College/University \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Professional License: State \_\_\_\_\_ Type \_\_\_\_\_ Number \_\_\_\_\_

(continued)

**Delta College**  
**PRE-EMPLOYMENT CERTIFICATION/RELEASE (continued)**

**PRIOR EMPLOYER VERIFICATION** (Please list your last three (3) employers or last seven (7) years of employment.)

1. Employer Name \_\_\_\_\_  
Employee Title \_\_\_\_\_  
Supervisor Name \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Presently Employed? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Employer Name \_\_\_\_\_  
Employee Title \_\_\_\_\_  
Supervisor Name \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Presently Employed? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Employer Name \_\_\_\_\_  
Employee Title \_\_\_\_\_  
Supervisor Name \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Presently Employed? Yes \_\_\_\_\_ No \_\_\_\_\_

**CRIMINAL HISTORY**

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please give details including date(s), type of offense(s), circumstances and county where conviction occurred:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*\*Conviction of a felony will not necessarily render you ineligible for a position, but the nature of the conviction, circumstances and/or time of occurrence may be considered in processing your application.**

Are there any pending felony charges against you? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date, place, charge and status of case:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Title of Position Applied For: \_\_\_\_\_

<b>TO BE COMPLETED BY THE HUMAN RESOURCE OFFICE ONLY</b>	
Date of Birth _____ <small>Month Day Year</small>	Social Security # _____ Race _____ Gender _____
Conditional Employment Offer Date _____	HR Representative Signature _____

# DELTA COLLEGE

## NOTICE OF INTENT TO VERIFY

### BACKGROUND INFORMATION

In connection with my application for employment with you, I understand that a consumer report may be requested that may include information as to my character, along with reasons for termination of past employment from previous employers. To facilitate this process, I hereby authorize the investigation of my past and present work, education, military service, character, and police records, to determine any and all information, excluding medical information, which is or may be, pertinent to my qualifications for employment. I hereby authorize you to provide any and all information, of record or not, and release you and all persons, agencies, companies and firms from any damages that may result from providing such information. Further, I understand that you may be requesting information concerning my motor vehicle operation history and criminal history from various states, private and insurance sources along with other public records available.

**Applicant Name** (*printed*) \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_

**Date** \_\_\_\_\_