Lawrence Tech
THEORY AND PRACTICE 1932
Human Resources

APPLICATION FOR EMPLOYMENT

Notice of Non-Discriminatory Policy
Lawrence Technological University adheres and conforms to all federal, state, and local civil rights regulations, statutes, and ordinances. No person, student, faculty, or staff member will knowingly be discriminated against relative to the above statutes. Lawrence Technological University is an Equal Opportunity Employer.

Notice of Disability Services
In compliance with Section 504 and the Americans with Disabilities Act (ADA), those applicants requiring reasonable accommodation to the application and/or interview process should notify the Office of Human Resources for assistance.

Inquiries or complaints may be addressed to the Office of Human Resources; please call 248.204.2151 for assistance.

Position you are applying for: _____ **Today's date:** _____

Desired annual salary or rate $_____ **Date available to start if hired:** _____

1 Personal Information

Name ❑ Dr. ❑ Mrs. ❑ Ms. ❑ Mr. _____
Last First Middle Initial

Mailing Address _____
Street City State Zip

Telephone _____
Home Business Alternate

Social Security No._____ Email Address _____

Type of employment desired? *(Check all that apply)* ❑ Full-time ❑ Part-time ❑ Temporary ❑ Day ❑ Evening

Have you previously been employed by Lawrence Tech? ❑ Yes ❑ No If yes, supervisor's name: _____

Referral source: ❑ Advertisement ❑ Employment Agency ❑ Associate ❑ LTU Website ❑ LTU Employee ❑ Other _____

Verification of U.S. citizenship or immigration status is required prior to employment.

Are you currently legally eligible to work in the United States? ❑ Yes ❑ No If yes, check one box below
❑ Unrestricted ❑ Practical training only

Are you 18 years or older? ❑ Yes ❑ No If you are under 18, can you furnish a work permit if it is required? ❑ Yes ❑ No

Can you perform the essential functions of the job applied for, with or without a reasonable accommodation? ❑ Yes ❑ No

Note: The position for which you are applying may require a security clearance. The fact that you admit to a conviction record does not necessarily mean that your application will be rejected or that you will be barred from employment. However, if a false answer is found at any time after you are on the job, you will be dismissed.

Have you been convicted of or pleaded guilty to a felony? ❑ No ❑ Yes (If yes, explain) _____

_____

Are there any felony charges pending against you? ❑ No ❑ Yes (If yes, explain) _____

_____

Do you have a valid driver's license? ❑ No ❑ Yes Licence No._____ State_____

Person to be notified in case of emergency: Name ❑ Ms. ❑ Mr. _____

Address _____
Street City State Zip

Telephone_____
Home Business

2 Academic and Professional Preparation

Are you a high school graduate? ❑ Yes ❑ No ❑ GED or equivalent Name of school: _____

Did you attend school under your present name? ❑ Yes ❑ No If no, please give name _____

List institution(s) attended (college, university, trade, vocational/technical, business, military, etc.)

Name and Address of Institution(s)	No. of Years Completed	Degree, Diploma, or Certifications Earned	Major Field of Study

Please list other skills/abilities or special training that you feel would qualify you for this position: _____

Note: Consideration of application cannot be completed until the Office of Human Resources receives **Official Transcripts** of academic credentials.

3 Work Experience

List work experience beginning with the most recent. If additional space is needed, attach additional sheet(s) or your resume.

Dates (Mo./Yr.)		Employer #1	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time ❑	Full Time ❑			
Supervisor's name and telephone number				May we contact this employer? ❑ Yes ❑ No
Description of the work you performed				
Reason for leaving				

Dates (Mo./Yr.)		Employer #2	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time ❑	Full Time ❑			
Supervisor's name and telephone number				May we contact this employer? ❑ Yes ❑ No
Description of the work you performed				
Reason for leaving				

Work Experience (cont.)

Dates (Mo./Yr.)		Employer #3	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time ❑	Full Time ❑			
Supervisor's name and telephone number				May we contact this employer? ❑ Yes ❑ No
Description of the work you performed				
Reason for leaving				

Dates (Mo./Yr.)		Employer #4	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time ❑	Full Time ❑			
Supervisor's name and telephone number				May we contact this employer? ❑ Yes ❑ No
Description of the work you performed				
Reason for leaving				

4 Teaching Experience

Section 4 to be completed by faculty applicants only. Non-teaching applicants continue with Section 5.

Name and Address of Institution	Subject(s) Taught	Dates (Mo./Yr.)	
		From	To

List additional courses/areas you are qualified to teach _____

List areas of competency in research or creative activity _____

Note: Please attach a **curriculum vita** with information that will assist the University in determining your qualifications for appointment to a teaching position.

5 Veteran Information

List branch, rank, and special training received in the Armed Forces _____

6 Personal References (Excluding Former Employers or Relatives)

Name and Address	Occupation	Years Associated	Phone Number(s)

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein. I authorize that the references listed above may provide you with any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I am aware that, if hired, my employment is subject to the current *Faculty or Staff and Administrator's Handbook* upon my receipt of such document.

I understand that the information that has been provided will be kept in confidence by Lawrence Technological University, its agents, and employees. I understand that the results of the information obtained as authorized by me in this document will not be released to any third party without my authorization or upon legal operation of law or court order.

AT-WILL STATUS

I agree that either party may terminate the employment relationship, with or without cause, at any time, for any reason, and I further accept that this agreement may be changed by the President and Executive Vice President/Provost. I agree that I shall be bound by the University's other rules, policies, regulations, and the terms and conditions of employment as they are from time to time changed and that no additional obligations can be imposed by me on the University except those which have been acknowledged, in writing, by the President and the Executive Vice President/Provost. I further agree that my employment is conditional upon satisfactory completion of documentation as required by the Immigration Reform and Control Act of 1986.

SIGNATURE OF APPLICANT_____ **DATE**_____

Please keep this survey separate from the Application for Employment and return it directly to the Office of Human Resources.

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RECRUITMENT SURVEY

Thank you for your interest in employment at Lawrence Technological University and for completing this survey.

Name _____
Last First Middle Initial

Social Security No. _____ Desired Salary _____

Position applying for: _____

Referral source: ❑ Advertisement ❑ Employment Agency ❑ Associate ❑ LTU Website ❑ LTU Employee ❑ Other _____

Federal government regulations require Lawrence Technological University to maintain records of job applicants by gender and race. Providing this information below is strictly voluntary on your part and will be kept confidential by the University. Disclosure or refusal to provide this information will not subject you to any adverse treatment. To ensure that all applicants are treated fairly, this survey will be kept separate from your Application for Employment.

Gender:

❑ Female ❑ Male

Ethnicity (check one):

❑ **Hispanic or Latino.** All persons of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.

❑ **Not Hispanic or Latino.**

Check one or more races to indicate what you consider yourself to be.

❑ **American Indian or Alaskan Native.** All persons having origins in any of the original peoples of North America and South America (including Central America), who maintain cultural identification through tribal affiliation or community attachment.

❑ **Black or African-American.** All persons having origins in any of the Black racial groups of Africa.

❑ **White.** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

❑ **Native Hawaiian or Other Pacific Islander.** All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

❑ **Asian.** All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent. This area includes, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Citizenship (check one):

❑ U.S. Citizen

❑ Non-Citizen/Permanent Resident Visa

❑ Non-Citizen/Student Visa

❑ Non-Citizen/Not Permanent or Student Visa

❑ Lawful Permanent Resident Alien

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