



STANLY COMMUNITY COLLEGE

141 College Drive
Albemarle, NC 28001

(704) 982-0121
Fax: (704) 982-0819
www.stanly.edu

APPLICATION FOR EMPLOYMENT

Print in black ink or use typewriter.

Retirement No. _____
(if active)

Position(s) applied for _____ Date _____

If applying for a teaching position, list subject area(s): _____

Print name _____
(Last) (First) (Middle)

Permanent address _____
(Street and No. or R.F.D.) (City) (State and ZIP)

Present address _____
(If different from permanent) (Street and No. or R.F.D.) (City) (State and ZIP)

Telephone _____ (Unlisted: ___Yes ___No) _____
(Residence) (Cell) (Business)

Email address: _____

If you answer "Yes" to A or B, explain on page 4 under "Additional Information." (An affirmative answer will not automatically disqualify you from being considered as a candidate for employment.)

- (A) Have you ever been convicted of any criminal offense other than minor traffic violations? Yes _____ No _____
(B) Have you ever been discharged or asked to resign from a position? Yes _____ No _____

If you are related to any SCC employee, please provide name and relationship: _____

EDUCATIONAL RECORD

Give your complete educational history below:

| Type of School | Name and Location | Dates Attended | | Circle Number of Years Completed | Credit Hours** | Did you graduate? | Type of Degree | Major |
|----------------------------|-------------------|----------------|---------|----------------------------------|----------------|-------------------|----------------|-------|
| | | Mo. Yr. | Mo. Yr. | | | | | |
| Elementary or *High School | | | | 1 2 3 4 5 6 7 8 9 10 11 12 | | | | |
| College or University | | | | 1 2 3 4 | | | | |
| Graduate or Professional | | | | 1 2 3 4 | | | | |
| Other | | | | | | | | |

*Or have you passed the GED test? Yes _____ No _____

**Indicate quarter hours with the letter "Q"; semester hours, "S."

EDUCATIONAL RECORD (continued)

| Level | Major Subject Areas | No. Cr. Hrs. | Avg. Gr. | Minor Subject Areas | No. Cr. Hrs. | Avg. Gr. |
|---------------|---------------------|--------------|----------|---------------------|--------------|----------|
| Undergraduate | | | | | | |
| Graduate | | | | | | |

List courses taken dealing with community or junior colleges: _____

Title of Thesis _____
 Title of Dissertation _____

A copy of a transcript of college credits is required before this application can be processed. This copy will not be returned. (Photocopies will satisfy this requirement.)

List subjects you feel qualified to teach: _____

List other activities which you feel qualified to direct: _____

ACTIVITIES AND HONORS

List professional recognitions, current professional memberships, publications, civic activities, hobbies, etc., below:

List fields of work for which you are licensed, registered, or certified giving date(s) and source(s) of issuance: _____

EMPLOYMENT RECORD

Answer questions for each period of employment. Answer as completely as possible. Begin with present or last position. If more space is needed, enclose another sheet.

Title of present or last position _____ Starting salary _____ Last salary _____

Name and title of supervisor _____ Number of persons supervised by you _____

Name of employer _____ Address _____

| | | |
|--|--------|---------|
| Date employed: | | |
| Date separated: | | |
| Full-time | Years: | Months: |
| Part-time | Years: | Months: |
| If part-time, number of hours worked per week: | | |

Duties _____

Reason for leaving _____

May we contact this employer regarding your character and qualifications? Yes ___ No ___

EMPLOYMENT RECORD (continued)

Title of previous position _____ Starting salary _____ Last salary _____

Name and title of supervisor _____ Number of persons supervised by you _____

Name of employer _____ Address _____

| | | |
|--|--------|---------|
| Date employed: | | |
| Date separated: | | |
| Full-time | Years: | Months: |
| Part-time | Years: | Months: |
| If part-time, number of hours worked per week: | | |

Duties _____

Reason for leaving _____

May we contact this employer regarding your character and qualifications? Yes ___ No ___

Title of previous position _____ Starting salary _____ Last salary _____

Name and title of supervisor _____ Number of persons supervised by you _____

Name of employer _____ Address _____

| | | |
|--|--------|---------|
| Date employed: | | |
| Date separated: | | |
| Full-time | Years: | Months: |
| Part-time | Years: | Months: |
| If part-time, number of hours worked per week: | | |

Duties _____

Reason for leaving _____

May we contact this employer regarding your character and qualifications? Yes ___ No ___

Title of previous position _____ Starting salary _____ Last salary _____

Name and title of supervisor _____ Number of persons supervised by you _____

Name of employer _____ Address _____

| | | |
|--|--------|---------|
| Date employed: | | |
| Date separated: | | |
| Full-time | Years: | Months: |
| Part-time | Years: | Months: |
| If part-time, number of hours worked per week: | | |

Duties _____

Reason for leaving _____

May we contact this employer regarding your character and qualifications? Yes ___ No ___

REFERENCES

List persons other than relatives and employees of Stanly Community College who are in a position to certify your character, ability, experience, and qualifications for the position. If you have a placement file that contains references, please have the file forwarded to the Human Resources Office.

Name _____ Address _____

Phone(s) _____

Name _____ Address _____

Phone(s) _____

Name _____ Address _____

Phone(s) _____

PROFESSIONAL STATEMENT/ADDITIONAL INFORMATION

For academic and administrative positions only: In the space provided, please indicate your philosophy of education as it relates to the community college and your views of the role of the community college today and the future.

CERTIFICATE OF APPLICANT

Please read carefully before signing. If you have any questions regarding the following statements, please ask for assistance.

I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that any false information contained in this application may result in my discharge.

I authorize you to communicate with all my former employers, school officials, and persons named as references and waive my right to see written references. I hereby release all employers, schools, and individuals from any liability for any damage whatsoever resulting from giving such information.

I understand that as this organization deems necessary I may be required to work overtime hours or hours outside a normally defined work day or work week.

I understand that employment may be contingent upon a satisfactory criminal background check and drug screening in accordance with SCC policy.

If employed, I understand and agree that such employment is based on a six-month or one-semester initial period. Thereafter, annual contracts are issued. In accordance with SCC policy, employment may be terminated by either party during the contract period.

Applicant's signature

Date

EQUAL EMPLOYMENT OPPORTUNITY INFORMATION

Stanly Community College prohibits discrimination based on race, sex, color, creed, national origin, age, or disability. The information requested below will in no way affect you as an applicant. SCC is required by the federal government to collect this information. It will be used to see how well our recruitment efforts are reaching all segments of the population. This information will be filed separately from your application.

Date of birth: (month) (day) (year)

Check one: Sex Male Female

Ethnic group: White African American American Indian Hispanic Asian Other _____

Position for which you are applying: _____

How were you referred to SCC: Newspaper ad College On my own
 Current employee Agency Other
 NCCCS publication ESC Internet

Name of referral source: _____

Name (print) _____

Signature _____ Date _____