

As of 10/1/11, applications and/or resumes will only be accepted for positions that are open at the time of the receipt of the application/resume. Unsolicited applications will not be accepted or retained.

MISSISSIPPI UNIVERSITY FOR WOMEN
Office of Human Resources, 1100 College Street, MUW-1609, Columbus, MS 39701
Fax: 662-241-7616 / Email: HrInfo@hr.muw.edu
Application for Employment

**All requested information must be completed. Application must be completed in full even if attaching a resume.
Please Type or Print.**

PERSONAL INFORMATION

Last Name	First Name	Middle Initial	Social Security Number	Today's Date
Street Address	Apartment Number	City	State	Zip Code
Day Phone ()	Evening Phone ()	Other number(s) where you can be reached		
Fax ()	Email	When can you begin work?		
Shift(s) you are available for work: Schedule(s) you are available for work:	<input type="checkbox"/> Day <input type="checkbox"/> Full-Time	<input type="checkbox"/> Evening <input type="checkbox"/> Part-Time	<input type="checkbox"/> Night <input type="checkbox"/> Temporary	<input type="checkbox"/> On Call <input type="checkbox"/> Weekend <input type="checkbox"/> Any Shift

OTHER REQUIRED INFORMATION

Position(s) applied for:

Are you a U.S. Citizen? Yes No If No, can you submit proof of your legal right to work in the U.S. if you are offered employment? Yes No
(Proof of citizenship or immigration status will be required upon offer of employment.)

If you have previously been employed at MUW, give department, title, supervisor and dates:

Mississippi law prohibits any individual from being employed in a department or unit under the supervision of a relative. If you have any relative(s) at Mississippi University for Women, give their name(s), relationship and department where employed:

Do you possess a valid driver's license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, type of license:	<input type="checkbox"/> Operator <input type="checkbox"/> Commercial	Driver's License Number:	
					State issued:	

Has your license ever been restricted, revoked, or suspended? Yes No If Yes, please explain:

Have you ever been convicted of a crime (felony or misdemeanor including DUI) other than routine traffic citation(s)? Yes No
If yes, please explain. (A record of conviction will not necessarily bar you from employment.)

EDUCATION

Highest Grade Completed – 1 2 3 4 5 6 7 8 9 10 11 12 GED

Technical/Vocational – 1 2	College/Graduate School – 1 2 3 4 5 6 Or Hours Completed:					Degree Received	Courses Or Major
	School/Institution	City	State	Dates Attended			
High School				To			
GED				To			
Vocational/ Technical				To			
College/ University				To			
College/ University				To			

Name	Social Security Number
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SPECIAL SKILLS

Do you type? Yes No

List equipment you can operate (copier, 10-key calculator, etc.):

Computer systems/software with which you are experienced (Microsoft Word, Excel, WordPerfect, etc.):

List other job-related skills you have (shorthand, dictation, etc.):

**EMPLOYMENT
(List Most Recent Employer First)**

Dates of Employment			Employer's Name				Your Title
Month Year			Supervisor's Name/Title				Duties
From			Street Address				
To			City	State	Zip	Employer's Phone Number	
Check One	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part time	<input type="checkbox"/> Temporary	Reason for leaving			

Dates of Employment			Employer's Name				Your Title
Month Year			Supervisor's Name/Title				Duties
From			Street Address				
To			City	State	Zip	Employer's Phone Number	
Check One	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part time	<input type="checkbox"/> Temporary	Reason for leaving			

Dates of Employment			Employer's Name				Your Title
Month Year			Supervisor's Name/Title				Duties
From			Street Address				
To			City	State	Zip	Employer's Phone Number	
Check One	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part time	<input type="checkbox"/> Temporary	Reason for leaving			

May we communicate with your employers?	Past:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Present:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**Certification by Applicant
(Please read carefully.)**

I certify that all information provided on this application is true and complete to the best of my knowledge and belief. I understand that employment in certain positions may be conditional upon a review of criminal records. I further authorize Mississippi University for Women to obtain a copy of my motor vehicle record if employed in a position requiring operation of a university vehicle.

I authorize investigation of all statements contained in this application. I authorize MUW to request and obtain records to determine the accuracy of my responses. I also request and authorize the individual, department, or institution to which this letter is addressed to furnish the information requested. I release them and MUW from any liability or damage that may result from furnishing or requesting information.

I agree to acquaint myself with and abide by all applicable university rules, regulations and policies upon my acceptance of employment with the university. If I accept employment as a non-exempt employee, I agree to work overtime when requested to do so and I understand that overtime may be compensated either by monies or by compensatory time. I understand any misleading or incorrect statements on this application are grounds for rejection of my application or termination of any subsequent employment with the university.

I understand that this document is an employment application and not a contract of employment. I understand that upon interview and acceptance of employment with Mississippi University for Women, my employment is at will unless I receive an **Employment Contract from the Board of Trustees of State Institutions of Higher Learning**, which means I retain my normal right to terminate my employment at any time, with or without cause, and Mississippi University for Women retains the same right. A copy of this document is as valid as the original.

Signature:		Date:	
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