



Department Name and Position you are applying for (please be specific):	G number:

**Personal Information**

Last Name:	First Name:	Middle Name:	Suffix:
Address:	City:	State:	Zip Code:
Email Address:	Cell Number:	Secondary Number:	Location Preferred:
Have you ever been interviewed at San Jacinto College?			
If yes, when and where?			
Have you completed or submitted an application with San Jacinto College before?			
If yes, when and where?			
Briefly state reasons for interest in employment with San Jacinto College:			
Are you willing to work rotating shifts, including nights and weekends, if the job posting requires it?			
Are you related to any member of the San Jacinto College Board of Regents?			
If yes, indicate name(s) and department(s) (Enter 'N/A' if Not Applicable):			
Do you have any relatives working at San Jacinto College?			
If yes, indicate name(s) and department(s) (Enter 'N/A' if Not Applicable):			

**Work Availability**

Monday	From: To:	Comments:
Tuesday	From: To:	Comments:
Wednesday	From: To:	Comments:
Thursday	From: To:	Comments:
Friday	From: To:	Comments:
Saturday	From: To:	Comments:
Sunday	From: To:	Comments:

**Employment Eligibility**

In compliance with the Immigration Reform and Control Act, San Jacinto College hires only U.S. citizens and lawfully authorized alien workers who are eligible for employment. I understand that if a conditional offer of employment is made, I will be required to provide identification and proof of citizenship or authorization to work in the U.S. within three days of the start of employment.

**If you are NOT an American citizen, complete the following:**

VISA Type:	Visa Number:	Work Permit Number:

## Criminal History

Have you ever been convicted of any crime, including misdemeanors, or participated in deferred adjudication? (A conviction record is NOT an automatic ban to employment. The nature of the crime will be considered in relation to the position to which you are applying):

If yes, briefly describe the nature, date, and place of the offense and disposition of the case (Enter 'N/A' if Not Applicable):

In accordance with Texas Education Code, Section 51.215, an institution of higher education is entitled to obtain criminal history record information that relates to an applicant for employment in a security sensitive position. Your application for employment shall NOT be considered complete unless the College has been given your permission to obtain such information. The College will use this criminal record information only for the purposes of evaluating applicants for employment with San Jacinto College in a security sensitive position. Authorization is also given to the College to obtain information regarding driving records when the applicant will be required to operate a motor vehicle owned or under the control of the College.

**BY SIGNING BELOW, I CERTIFY THAT I HAVE READ AND AGREE WITH THE STATEMENT ABOVE.**

**Applicant's Name:**

**Date:**

## Education

Name of School:	Dates Attended:	Did you graduate?	Type of Degree (if applicable):
	From: To:		
Major (if applicable):	If no degree received, number of credit hours needed for degree:	List any scholarships, academic honors, awards, or special achievements:	
Name of School:	Dates Attended:	Did you graduate?	Type of Degree (if applicable):
	From: To:		
Major (if applicable):	If no degree received, number of credit hours needed for degree:	List any scholarships, academic honors, awards, or special achievements:	

## Additional Skills

List languages which you speak proficiently:	List languages which you read proficiently:
List computer software programs you have skill in:	
Please list additional skills, training, or experience that have provided you with the required knowledge and abilities for this position:	

## Work Experience

Employer Name:	Job Title:	Dates Employed:	Most Recent/Ending Salary:
		From: To:	
Supervisor Name:	Supervisor Title:	May we contact this employer?	Reason for Leaving:
Work Performed:			
Employer Name:	Job Title:	Dates Employed:	Most Recent/Ending Salary:
		From: To:	
Supervisor Name:	Supervisor Title:	May we contact this employer?	Reason for Leaving:
Work Performed:			

## Required References

Name of Reference:	Occupation:	Phone Number:	How do you know this reference?
Address:			
Name of Reference:	Occupation:	Phone Number:	How do you know this reference?
Address:			

## Agreement

I state that all information given by me in this application is true to the best of my knowledge. I authorize San Jacinto College to verify such information and to contact any reference given by me. Should San Jacinto College employ me, I agree that:

1. My employment shall be in accordance with the terms of (A) this application and (B) college policies and regulations that are currently in effect or as may be amended in the future. The College reserves the right to amend, modify or revoke its policies and such policies and regulations at any time. I will familiarize myself promptly with such policies and regulations, will abide, and be bound by the policies and regulations now or hereafter in effect.
2. I understand and agree that any employee handbook or policy manual I may receive will not constitute an employment contract, but will be merely a gratuitous statement of San Jacinto College's current policies.
3. I understand that San Jacinto College does not reimburse applicants for expenses incurred while interviewing, nor for moving expenses for successful applicants.
4. As a non-contracted employee, I have no property right in a job and I may be terminated for no reason or any reason, except that if a reason exists, it is not an unlawful reason, the College's only obligation being to pay wages or salary earned by me to date of termination. Without limitation, failure to abide by college policies and regulations, failure to perform the essential requirements of the job and the falsification of any information given by me on this application may result in the termination of my employment.
5. The College is entitled to obtain criminal history record information about me and use information obtained for the purpose of evaluating me for positions designated as security sensitive.
6. As a new employee in any position required by Board policy, I may be required to undergo a physical examination prior to my first day of employment to determine if I am fit to perform the essential functions of my job.

**BY SIGNING BELOW, I CERTIFY THAT I HAVE READ AND AGREE WITH THE STATEMENTS ABOVE.**

**Applicant's Name:**

**Date:**

### HIRING DEPARTMENT USE ONLY

**THE HIRING LEADER IS RESPONSIBLE FOR OBTAINING APPROVALS FOR ANY POSITION IN WHICH FEDERAL, STATE, OR GRANT FUNDING WILL BE AWARDED PRIOR TO A NEW EMPLOYEE BEGINNING EMPLOYMENT.**

Interviewed?	Yes No	Comments:
Finalist?	Yes No	Comments:
Federal Work Study approved by Financial Aid? <b>If yes, MUST BE VERIFIED</b>	Yes No	If yes, verified by whom?
State Work Study Approved by Financial Aid? <b>If yes, MUST BE VERIFIED</b>	Yes No	If yes, verified by whom?
Grant Funds approved by Grants? <b>If yes, MUST BE VERIFIED</b>	Yes No	If yes, verified by whom?

<b>Department ORG.</b>	<b>Board Approved Rate of Pay</b>	<b>Board Approved Title</b>

**Hiring Leader Approval  
(Please Print):**

**Date:**

**Signature:**