

Employment Application - Community Education Instructor

PERSONAL INFORMATION

Last name: _____ First Name: _____ Middle: _____

Address: _____ Telephone: _____

City: _____ State: _____ Zip: _____

Are you:

- yes no Over the age of 18?
- yes no A previous employee of Plymouth State? When? _____ to _____
- yes no Legally permitted to work in the United States?
- yes no A licensed driver? (Answer only if required of position for which you are applying)

Have you ever been convicted of any crime/s that were not annulled in a court? (List all except minor traffic violations such as parking tickets)

yes no If yes, state citations, dates, courts and places where offense/s occurred: _____

EDUCATION AND TRAINING

SCHOOL TYPE	NAME AND LOCATION OF SCHOOL	COURSE MAJOR	LAST YEAR COMPLETED	DID YOU GRADUATE?	LIST DEGREES
High school			9 10 11 12	Y N	
GED				Y N	
College			1 2 3 4	Y N	
Trade/Technical			1 2 3 4	Y N	
Post Graduate			5 6 7 8	Y N	

WORK EXPERIENCE

Note: Starting with the most recent position, furnish all information requested. Please provide a complete employment history including explanations for each period of unemployment. A resume providing this information may be attached as a supplement, but **not** in lieu of completing the information requested.

Present/Last Employer: _____ Type of business: _____

Address: _____ Telephone #: _____

Supervisor (Name/Position): _____ From: _____ To: _____

Job Title: _____

Description of Job and Duties: _____

Present/Last Employer: _____ Type of business: _____

Address: _____ Telephone #: _____

Supervisor (Name/Position): _____ From: _____ To: _____

Job Title: _____

Description of Job and Duties: _____

Have you ever been suspended, discharged or asked to resign from any job? yes no

If yes, please explain: _____

APPLICATION AGREEMENT AND CERTIFICATION

I understand and agree that:

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification of refusal of employment or, if employed, termination from employment with Plymouth State University.

Any offer of employment I may receive from Plymouth State University is contingent upon my successful completion of the University's total pre-employment screening process, including satisfactory reference checks. In processing my application for employment, the school may verify all the information provided by me, or may procure, with my consent, information concerning my prior employment, military record, education, driving record and criminal record, if necessary for the position for which I have applied.

I authorize and request that all of my present and former employers, including supervisors and managers, and any other individuals I have listed as personal references, furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, and hereby release them from any and all liability for damages arising from furnishing the requested information.

In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of PSU I further understand that no manager or representative of the school, other than the President or Vice President, Human Resources, has any authority to enter into any agreement with me for employment for any specified period of time or to make any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and by one of the individuals designated above.

Signature: _____ Date: _____

PSU is an Affirmative Action/Equal Opportunity employer.

All qualified applicants receive consideration for employment without regard to race, color, religion, sex, pregnancy, sexual orientation, age, marital status, national origin, disability, marital, veteran or any other legally protected status.



COMMUNITY EDUCATION COURSE PROPOSAL FORM

Course Title: _____

Course Description: _____

Start Date: _____ End Date: _____ Day(s) of the Week: _____

Start Time: _____ End Time: _____ Number of Weeks: _____

Minimum number of students: _____ Maximum number of Students: _____

Prerequisites: _____

Required or Recommended Text: _____

(Author)

(Title)

Preferred Location/Room (circle): Boyd Hyde Rounds Memorial Silver D&M PE Center

Room: _____ Other: _____

Additional Room Requirements: _____

Please attach a simple class outline. Include what will be covered in each session and the method of instruction (lecture, demonstration, class participation, field trip, guest presenters, hands-on activities, etc.). Specify which sessions need different audio visual equipment. **Proposals will not be considered without this outline.**

Audio visual equipment required: _____

Will there be a materials fee? Yes No If yes, how much? \$_____per student.

Will students need to purchase books or supplies? Yes No If yes, please list and give estimate of cost and where supplies may be purchased. _____

Tuition Charge: \$_____

Any special fees beyond the tuition and material fees required? Yes No If yes, how much? Please list the reason for the extra fee: _____

Have you taught this class before? Yes No If yes, where? _____

Please attach a short biography for inclusion in the Community Education brochure.

Name: _____

Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

E-mail Address: _____

Signature: _____