

STUDENT EMPLOYMENT APPLICATION

Office of Financial Aid

1325 N. College Avenue
Claremont, CA 91711
909.447.2504 FAX 909.447.6389

An Affirmative Action/Equal Opportunity Employer



EMPLOYMENT INTEREST

Position Title:

Where did you hear about the position for which you are applying:

Name: Last, First, Middle Initial.

Soc. Sec. # (Voluntary)

Permanent Telephone No
()

Address: Number, Street, Apartment or Space Number

Campus Telephone No.
()

City, County, State, Zip Code

Email Address:

Do you have the legal right to work in the United States? Yes No

Have you been previously employed by the Claremont School of Theology (CST)? Yes No
(If yes, list dates/positions/departments)

Have you worked under name(s) other than stated above? Yes No
(i.e.: Maiden Name, Previous Married Name etc) If yes, please list:

Are you related to any current CST employee(s)? Yes No If so, please identify.

Name: _____ Dept. _____

Respond only if driving is an essential function of the position for which you are applying.

Do you have a valid California Driver's License? Yes No Expiration Date:

If 'yes', please identify type: Class A Class B Class C

Please provide a DMV printout of your driving record.

If 'no', is there anything that would prohibit you from obtaining a California Driver's License?

Have you ever been convicted of a crime? Yes No

(You may omit minor traffic violations, any offense committed prior to your 18th birthday adjudicated in a Juvenile Court or under a youth offender law, or any incident that has been sealed under Welfare and Institutions Code Section 781 or Penal Code Section 1203.45.) If "Yes," please complete the attached Conviction Disclosure Form. A "Yes" answer does not automatically disqualify you from receiving consideration for employment

Claremont School of Theology Employment Application

EDUCATION AND SPECIAL TRAINING					
Name(s)/Location(s) of Colleges or Universities Attended	Major	Specialization Within Major	Date Grad		Degree Earned
Name(s)/Location(s) of Business, Technical or Trade Institutions Attended	Course of Study		To	From	Certificates or Licenses Obtained
Current Professional Licenses or Certificates –					
Specify type(s)				Expiration date(s)	
ADDITIONAL QUALIFICATIONS (Please be specific.)					
Special Related Skills (e.g., language or clerical skills, statistical analysis, etc.)					
Related Equipment Which You Operate Proficiently (e.g., machine transcription, 10-key calculator, electronic typewriter, word processor, etc.)					
Computer Knowledge and Ability:					
Hardware	Familiarity	Proficiency	Software	Familiarity	Proficiency
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

<p>Have you ever been fired or asked to leave your employment? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, explain</p> <hr/> <hr/> <hr/>
--

Claremont School of Theology Employment Application

EMPLOYMENT THE EMPLOYMENT HISTORY MUST BE COMPLETED IN DETAIL EVEN THOUGH A RESUME MAY BE INCLUDED OR REQUIRED. THANK YOU.

Beginning with your present job, list all employment activity for the past 10 years. Each promotion should be identified as a separate job. Earlier relevant experience may also be included. Attach additional sheets if necessary.

Dates of Employment From _____ To _____ mm/yy mm/yy Average Hr. per week _____ Last Salary _____ (Annual, hourly, weekly) Commissions/OT _____	Name of Employer		Telephone No. ()
	Address		City, State, Zip Code
	Supervisor's Name		Your Working Title
	Title		
	Duties Performed		
	Number of People You Supervised	Reason For Seeking Other Employment	

Dates of Employment From _____ To _____ mm/yy mm/yy Average Hr. per week _____ Last Salary _____ (Annual, hourly, weekly) Commissions/OT _____	Name of Employer		Telephone No. ()
	Address		City, State, Zip Code
	Supervisor's Name		Your Working Title
	Title		
	Duties Performed		
	Number of People You Supervised	Reason For Seeking Other Employment	

Dates of Employment From _____ To _____ mm/yy mm/yy Average Hr. per week _____ Last Salary _____ (Annual, hourly, weekly) Commissions/OT _____	Name of Employer		Telephone No. ()
	Address		City, State, Zip Code
	Supervisor's Name		Your Working Title
	Title		
	Duties Performed		
	Number of People You Supervised	Reason For Seeking Other Employment	

