

ROOSEVELT UNIVERSITY

An Equal Opportunity Employer

430 S. Michigan Avenue, Chicago, IL 60605 (312) 341-3500

1400 N. Roosevelt Blvd., Schaumburg, IL 60193 (847) 619-7300

If you need this application form in an alternate format and/or need any accommodation in the application or hiring process, please contact the Human Resources Office, Chicago Campus, Room AUD 846, (312) 341-4332.

Faculty Employment Application

Name _____
last first middle date of application

Address _____
number street city state zip

Telephone (area code & number) (_____) _____ (_____) _____
home other

Date Available _____ Availability: full time part time days evenings weekends

Position(s) Applied for _____ Salary Expectation \$ _____

Are you able to perform with or without an accommodation the functions of the job for which you are applying? yes no
(See job posting.)

Are you legally entitled to work in the U.S.? yes no

Have you ever worked for Roosevelt University? yes no If yes, what department? _____

How did you learn of this job opening? If referred by a Roosevelt employee, please give the employee's name.

EDUCATION: (List institutions chronologically beginning with most recent).

Name of College or University	Location (city and state)	# of years attended	Major Fields of Study	Degree(s)

Applicants for academic positions are required to submit an official transcript of their college record.

If required, have you requested that your transcript(s) be sent to Roosevelt University? yes no

Title of master's thesis: _____

Title of doctoral dissertation: _____

Major advisor or doctoral dissertation chairman: _____

Advanced professional or post-doctoral education or training (specify institutions, programs and dates): _____

Roosevelt University is an equal opportunity employer and does not unlawfully discriminate on the basis of race, color, national origin, ancestry, religion, sex, age, sexual orientation, marital status, unfavorable discharge from the military, handicap or disability, source of income, citizenship or being the victim of domestic or sexual violence.

REFERENCES:

1. Name _____ Telephone (____) _____
Title & Employer _____
Address _____
Street City State Zip

2. Name _____ Telephone (____) _____
Title & Employer _____
Address _____
Street City State Zip

3. Name _____ Telephone (____) _____
Title & Employer _____
Address _____
Street City State Zip

Have you ever been convicted of a felony or misdemeanor? yes no
(You are not required to disclose any conviction for which the records have been expunged, impounded or sealed).

If yes, please explain _____

Have you ever been discharged or suspended from employment? yes no

If yes, please explain _____

Please include any other last or first names by which you may have been known to past employers to facilitate release of information.

I hereby authorize Roosevelt University to conduct work history and reference checks, including information obtained through personal interviews with persons named as employers and references, to determine my acceptability for employment. Pursuant to the *Illinois Review of Personnel Records Act, 820 ILCS 40/1 et seq.*, I hereby waive written notice from my current employer and/or any previous employers and authorize them to release information regarding any disciplinary actions taken against me within the past four years. Further, I hereby release the officers, agents, employees and directors of each of my current and past employers and Roosevelt University, Their affiliates, officers, agents, employees, trustees and directors from any and all liability arising from disclosure of personnel records and from verbal appraisals of my past performance.

Signature

Date

Print Name

The information I have furnished on this application form is true and complete. I understand that any false or misleading information made by me on this application form or in connection with my application for employment may result in rejection of the application, or if I am employed by the University, in the termination of my employment. Further, I understand that an offer of employment is contingent upon my submitting the required Form I-9, including evidence of identity and work authorization.

Signature

Date