



**Employment Application**  
**Faculty and Professional Staff**

**Position Information**

Job Title: \_\_\_\_\_  
Department/Office: \_\_\_\_\_  
Recruitment Number: \_\_\_\_\_

**Personal Information**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Message Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

- Are you over the age of 18? \_\_\_yes \_\_\_no
- Are you legally eligible for employment in the United States (Immigration Reform and Control Act of 1986)? \_\_\_yes \_\_\_no
- If you are not a citizen of the United States, of which country are you a citizen? \_\_\_\_\_
- Type of VISA that you obtain: \_\_\_\_\_ Date VISA was issued: \_\_\_\_\_
- Have you ever been convicted of a felony or any offense involving dishonesty? \_\_\_yes \_\_\_no  
    If yes, please explain briefly. *Note: A conviction does not necessarily eliminate you from employment consideration. Each conviction will be reviewed with respect to the offense, circumstances, seriousness, and the position for which you apply.*
- Have you ever or are you currently employed by an Oregon University System institution or by the Chancellors Office? \_\_\_yes \_\_\_no

If yes, list the name of the institution and the dates to/from that you worked there :

Please list the name and department of any relatives who work for WOU. (This response is considered for placement purposes. WOU does not place relatives in positions which create supervisory/subordinate relationships):

I hereby certify that the information provided in this application and/or supplemental materials is freely given, true, and complete. I understand that any false, fraudulent, or misleading statements, answers, or information may be sufficient grounds for immediate rejection of my application, denial of employment, disciplinary action or dismissal from service if hired. I authorize the Office of Human Resources at Western Oregon University to thoroughly investigate my work and educational history and verify data provided on this application or given during the selection process. Furthermore, I also authorize the Office of Human Resources at Western Oregon University to conduct a criminal background investigation, check my driving record, or contact my present or past employers if necessary. I authorize all past employers mentioned herein to release employment information requested about me. I hereby release the Office of Human Resources at Western Oregon University, as well as any other agency, school, or company contacted from any liability or damage which may result from obtaining the information requested. The Office of Human Resources at Western Oregon University may give copies of my signed authorization to those contacted.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: Applicants who submit this form electronically will be asked to sign the form at the time of initial interview (if asked to interview).

**ALL INFORMATION BELOW IS OPTIONAL AND CONFIDENTIAL**

*This page is used by the Office of Human Resources only and is not seen by the hiring department*

**POSITION INFORMATION**

**Job Title:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Recruitment Number:** \_\_\_\_\_

*Western Oregon University is committed to an affirmative action program that promotes the effective recruitment of women and members of racial/ethnic minority groups. The information in this document will be kept confidential and used to fulfill reporting requirements. Completion of this form is voluntary; a decision not to disclose this information will not result in any adverse treatment of your employment application.*

**DEMOGRAPHIC INFORMATION**

**In What City and State do you live?** City: \_\_\_\_\_ State: \_\_\_\_\_ If in Oregon, County: \_\_\_\_\_

**AFFIRMATIVE ACTION INFORMATION**

**Gender** (check one):  Male  Female

**Race/Ethnicity:**

Please indicate your ethnic identity by answering the following question: **Are you Hispanic or Latino?**  Yes  No

What is your race? Please choose one or more.

**Asian or Pacific Islander:** All persons having origins in any of the peoples of the Far East, Southern Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

**Black (Not of Hispanic Origin):** All persons having origins in any of the Black racial groups of Africa.

**Hispanic:** All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

**Native American or Alaskan Native:** All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

**White (Not of Hispanic Origin):** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East

**VETERAN STATUS INFORMATION**

Check if applicable:  Special Disabled Veteran  Vietnam Era Veteran  Newly Separated Veteran  Other Protected Veteran

**Special Disabled Veteran:** Either a) a veteran who is entitled to compensation (or who would be but for the receipt of military retired pay) under laws administered by the Department of Veterans Affairs for a disability (I) rated at 30% or more, or (ii) rated at 10 or 20% in the case of a veteran who has been determined under Section 1506 of Title 38, to have a serious employment handicap; or b) a veteran who was discharged or released from active duty because of a service-connected disability.

**Vietnam Era Veteran:** A veteran whose active military, navy or air service (or any part of it) was during the period beginning August 5, 1964 and ending May 7, 1975, provided that either of the following is true: 1) the veteran served on active duty for a period of more than 180 days and was discharged or released with other than a dishonorable discharge, or 2) the veteran was discharged or released from active duty because of a service-connected disability.

**Newly Separated Veteran:** A veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty.

**Other Protected Veteran:** A veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized. For guidelines on identifying campaign or expeditions that met this criterion, go to [www.opm.gov/veterans/html/vgmedal2.htm](http://www.opm.gov/veterans/html/vgmedal2.htm)

**ADVERTISING INFORMATION:**

**Where did you first learn about this position?**

Printed Advertisement Please specify: \_\_\_\_\_

Web Page Please specify: \_\_\_\_\_

Other Source Please specify: \_\_\_\_\_

*At Western Oregon University (WOU), no qualified person shall, solely by reason of disability, be denied access to, participation in, or the benefits of, any program or activity operated by the University. If requested, WOU will provide reasonable accommodation to applicants in order to provide access to the application, interviewing, and selection process. You are not required to note the presence of a disability on your application. If you require reasonable accommodation in the application and/or interview process due to disability, requests must be made in a timely manner. Contact Human Resources at (503)838-8490.*