

Jackson State University
Jackson, Mississippi 39217

APPLICATION FOR EMPLOYMENT
(Instructional Personnel)

Date of Application _____ 20 _____

I. PERSONAL DATA

Name _____
Last First Middle

Present Address: _____
Street City State Zip Code

Telephone _____

Permanent Address: _____
Street City State Zip Code

Telephone _____

Are you a U.S. Citizen? _____ If not, indicate visa status _____

Social Security No. _____

Present Position or status _____ Present Salary _____

Reason for leaving present position _____

When will you be available for employment? _____ Least salary you would consider _____

This next questions are necessary to comply with federal requirements: THERE SHALL BE NO DISCRIMINATORY USE OF THIS INFORMATION

RACE American Indian Asian Black Hispanic White Other _____

Date of Birth: _____ Sex: Male Female

If you are handicapped and require special accommodations, please explain in the space below:

MILITARY SERVICES

DATES OF ACTIVE DUTY: From _____ to _____
Month Day Year Month Day Year

Branch of Service _____ Rank at Time of Discharge _____

Other Professional Experience: (List in chronological order such activities as special research or committee work, leadership activities, organization work.)

Name of Experience	Dates From – To	Full Name, Title, and Address of the Person To Whom you were Responsible

Travel: (Give places visited and dates)

Other Work Experience: (List in chronological order business, trade, and summer occupations for which you receive remuneration.)

Firm or Institution	City and State	Full Name, Address of the Person To Whom you were Responsible	Position and Nature of Work	Dates From - To

Philosophy of Higher Education (State your personal philosophy. Attach additional sheets if more space is needed.)

V. ACTIVITIES, MEMBERSHIPS, AND HONORS

College or University Extracurricular Activities:

Professional Organizations:

Community and Service Organizations:

HONORS AND AWARDS

High School

College

Community

Other

Publications: (Gives title, Publishers, and dates.)

Interests, Skills and Hobbies:

VI. REFERENCES (College or University)

Position	Name	Address: Street, City and State
Faculty Adviser		
Professor in Major Area		
Professor in Minor Area		
Other		

I hereby certify that the information herein is a true and complete statement of my personal and professional record to date.

Signed _____

IMPORTANT

TO EXPEDITE CONSIDERATION OF YOUR CANDIDACY, PLEASE COMPLETE THE FOLLOWING:

1. Date YOU requested your college or university to send us your transcripts Month _____ Day _____ Year _____
2. Date YOU requested your placement office to send us your references Month _____ Day _____ Year _____

RETURN THIS FORM TO: Office of the Dean, (Appropriate College), Jackson State University, Jackson, Mississippi 39217

AN EQUAL OPPORTUNITY EMPLOYER

Jackson State University is an Equal Opportunity Employer. All applicants for faculty, staff, and student work-aid positions are considered without regards to race, sex, religion, national origin, age, or physical or mental handicap (except where such handicap renders the person incapable of doing the job).

In addition, Jackson State University recruits, admits and provides services, financial aid, and instruction to all students without regards to race, sex, religion, national origin, age, handicap, veteran or other status protected by law.