

EMPLOYMENT APPLICATION

COLLEGE MISSION

The mission of Richland Community College is to provide innovative educational environments, opportunities, and experiences that enable individuals, communities, and the region to grow, thrive, and prosper.

CORE VALUES

Commitment | Respect | Excellence | Accountability | Diversity

Application Procedure

- The College’s hiring representatives give careful consideration of all applications that are submitted. We recommend that you complete the employment application with careful attention to detail, including the “Work Experience” section even though this information may be repeated on your resumé.
- Please indicate the current open position for which you are applying on the application.
- If you are applying for more than one position, please fill out a separate application for each position.

Richland Community College is an equal opportunity employer and educator. Discrimination is prohibited against employees, job applicants, students, and contractors.

PLEASE PRINT OR TYPE ON THE APPLICATION

Date	Position applied for	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Name		Have you been employed by Richland before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give dates and job title.
Present address		
City	State	Zip
E-mail Address		Are you currently employed by Richland? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give dates and job title.
If part-time, indicate available hours for work.		Daytime phone and hours available to be reached. ()
		Evening phone and hours available to be reached. ()

Why are you interested in this position?

Where did you first learn about this job opening?

- Newspaper Advertisement (specify) _____
 Internet (specify website) _____
 Richland Employee
 Friend/Relative
 Walk-in
 Other _____

Education and Training

1. High school last attended 2. College/technical school 3. University 4. Other

Name of School	City and State	Course of Study	Graduated	List type of Diploma or Degree
1.			Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.			Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.			Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.			Yes <input type="checkbox"/> No <input type="checkbox"/>	

List academic honors, awards, scholarships, or activities you consider significant or relevant to employment.
Title of your Master's Thesis or Doctoral Dissertation.

Work Experience

(Begin with your most recent employment experience.)

Employer's name	City/State		Description of duties
Position title	From (Mo./Yr.)	To (Mo./Yr.)	
Hours per week	Reason for leaving		
Supervisor			
May we contact this employer now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Telephone number ()		
Employer's name	City/State		Description of duties
Position title	From (Mo./Yr.)	To (Mo./Yr.)	
Hours per week	Reason for leaving		
Supervisor			
May we contact this employer now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Telephone number ()		
Employer's name	City/State		Description of duties
Position title	From (Mo./Yr.)	To (Mo./Yr.)	
Hours per week	Reason for leaving		
Supervisor			
May we contact this employer now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Telephone number ()		
Employer's name	City/State		Description of duties
Position title	From (Mo./Yr.)	To (Mo./Yr.)	
Hours per week	Reason for leaving		
Supervisor			
May we contact this employer now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Telephone number ()		

(Please continue on a separate sheet of paper if you have other significant employment.)

Licenses/Certificates

Type	Year Received	Expiration Date

What relevant experiences have you acquired through employment, education and training, hobbies, or volunteer services that you would like the College to consider in relationship to the desired position?

List any additional training, skills, and/or knowledge which you believe may enhance your qualifications for employment.

List any professional organizations to which you belong.

(You may exclude organizations, the name or character of which indicates race, color, religion, sex, marital or parental status, national origin or ancestry, age, mental or physical disability, sexual orientation, military status, status as a disabled or Vietnam-Era veteran.)

List any articles, books, or other materials you have published. (For Academic applicants only)

Have you ever been a member of the armed forces? Yes No

If so, does your military experience have any relationship to the position for which you are applying? Please explain.

Are you authorized to work in the United States? Yes No

(You must be able to prove that you are legally employable by completing INS Form I-9 and providing documents verifying your identity within three days of accepting an offer of employment or within three days of the time employment actually commences.)

Employment References

List three (3) people who have had direct contact with your professional work. (e.g., supervisor, department chairperson, co-worker, professor.)

Name	Address (Home and/or e-mail)	Daytime Telephone	Occupation

Statement of Annuity Status for the State University Retirement System

Illinois universities and colleges are required to determine and report the State University Retirement System retirement status of all employees. Please provide the following information in regards to your State University Retirement System (SURS) status.

I have received or am currently receiving a retirement annuity from the State University Retirement System. Yes No

I have received or am currently receiving a retirement annuity from the State University Retirement System, and am currently employed by another SURS covered employer. Yes No

I hereby pledge that if I attain employment with Richland Community College and begin receiving a State University Retirement System benefit, I will notify the College in writing within 14 days of my change in retirement status. Yes No

I hereby pledge that if I attain employment with Richland Community College and accept additional employment with another SURS covered employer while receiving a State University Retirement System annuity, I will notify the College in writing within 14 days of accepting the new employment. Yes No

I understand that my failure to comply with the previous notification requirements may result in termination of my employment. . . . Yes No

STATISTICS AND SECURITY MEASURES Pursuant to the Jean Cleary Security Act, Richland Community College provides information relating to crime statistics and security measures for current and potential students and employees. For more information, as well as a printed copy of the College's crime statistics, please contact the Campus Security Office or Student Success Office at 217.875.7200.

Employment Application for Richland Community College

Please Read Carefully

I certify that the information on this application is true and complete. I understand that false information or statements provided on this application shall be considered sufficient cause for disqualification of consideration or dismissal from employment.

I authorize Richland Community College to contact previous employers and supervisors and to make any investigation necessary to verify the information appearing on this application, as well as an investigation of my character, reputation, and any information pertinent to my employment qualifications.

I also understand that nothing in this employment application is intended to be or should be construed to be a promise of employment or to define any specific period regarding employment. I also understand that if hired, my employment at Richland Community College is strictly an "at will" employment relationship, and that any changes in the "at will" relationship can be affected only by written agreement signed by the President of the College. This means that you or the College can terminate your employment at any time and for any reason or no reason.

To validate this application, the applicant must sign on the line so designated. If you are submitting this form electronically, please leave this date and signature line blank. Your signature pertaining to the understandings listed above will be required if your application proceeds to the next step of the process.

Date _____ Signature of Applicant _____

PLEASE RETURN COMPLETED APPLICATION TO:

Human Resources Department, Richland Community College
One College Park | Decatur, IL 62521 | 217.875.7211, Ext. 6218 | hr@richland.edu