Employment Application





Full Name:				Date:		
	Last	First	Middle			
Address:						
	Street Address			Apt/Unit #		
	City		State	Zip		
Contact:	Phone	Email				
Position Ap	plied for:					
	itizen of the United States? \ een employed by Gila Comn		o, are you authorized to worl No If yes, when:	k in the U.S.? Yes No		
				es, who?		
	<i>,</i> ver been convicted of a crim		, , ,	,		
If yes, expla	in here:					
Please list a applied for:		es, or experience you have	that you feel would especiall	y qualify you for the position		
Education	n:					
High School	l:		Did you g	raduate? Yes No		

College:			Numbe	r of Years Completed:
Did you graduate: Yes	No	Degree Awarded:		
College:			Numbe	r of Years Completed:
Did you graduate: Yes	No			
College:			Numbe	r of Years Completed:
Did you graduate: Yes	No	Degree Awarded:		
Certifications and/c	r Licens	ses:		
Certification/License:				Document #:
Issuing Authority:			Ехр	oiration Date:
Certification/License:				Document #:
Issuing Authority:			Ехр	piration Date:
Employment Histor	y:			
Organization:				Phone:
Address:				Last Supervisor:
Job Title(s):				_ Dates Employed:
Responsibilities:				
Reason for Leaving:				_
May we contact your pr	evious su	pervisor for a reference? Yes	No	
Organization: Phone:				
Address:				
Job Title(s):			_ Dates Employed:	
Responsibilities:				
Reason for Leaving:				_
May we contact your pr	evious su	pervisor for a reference? Yes	No	
Organization:				Phone:
Address:				Last Supervisor:
Job Title(s):				_ Dates Employed:
Responsibilities:				
Reason for Leaving:				_

No

May we contact your previous supervisor for a reference? Yes

Name:	Phone:
Organization:	Relationship:
Title in Organization:	
Email:	
Name:	Phone:
Organization:	Relationship:
Title in Organization:	
Email:	
Name:	Phone:
Organization:	Relationship:
Title in Organization:	
Email:	
Declaration and Signature:	
vestigation into all information contained in and statements ing an employment decision. I also understand that should fully adhere to the policies and regulations of Gila Communiconditioned upon successful completion of background chemical statements.	true and complete to the best of my knowledge. I authorize ins I have made on this application as may be necessary for reachan employment offer be extended to me and accepted that I will ity College. I understand that any employment offered may be cks and approval of the District Governing Board. I further under and nothing said or done during the application or interview ent contract.

GILA COUNTY PROVISIONAL COMMUNITY COLLEGE DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER

Signature: _____ Date: _____

Gila County Provisional Community College District is in compliance with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and the Rehabilitation Act of 1973, and does not discriminate on the basis of race, color, ethnicity, religion, sex, national origin, age, mental or physical disabilities, sexual orientation, gender identity or expression, veteran status, or any other legally protected class in any of its policies, practices, or procedures. This includes, but is not limited to, admissions, employment, financial aid, educational services, programs, and activities.



Invitation to Self Identify

Position Applied for:

Information fo	or Statistical Use	Only	
required to sol ments. Once re the same cons	icit the informate eceived, this info	tion indicated below. Th	oyer and complies with all applicable federal and state regulations. We ar his information is collected for statistical reporting and Federal require- nfidential and separate from your application materials. You will receive ot you complete this form. Your responses are voluntary and your cooper application.
Ethnicity—A	Are you?:		
<u>Hispanic or Lat</u>		Cuban, Mexican, Puert	o Rican, South or Central American, or other Spanish culture or origin re-
Not Hispanic o	<u>r Latino</u> : A perso	on not of a culture or or	igin noted above.
Select one o	or more of the	e following races:	
		_ '	gins in any of the original peoples of North and South America (including on through tribal affiliation or community attachment.
			eoples of the Far East, Southeast Asia, or the Indian Subcontinent, includin alaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
Black or Africa	n American: A p	erson having origins in a	any of the black racial groups of Africa.
Native Hawaiia Pacific Islands.	an/Other Pacific	<u>Islander</u> : A person havir	ng origins in any of the original peoples of Hawaii, Guam, Samoa, or other
White: A perso	on having origins	in any of the original pe	eoples of Europe, the Middle East, or North Africa.
Gender:			
Male	Female	Other	

Veteran Status:

Name:

Special Disabled Veteran: A veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability: rated at 30 percent or more; or, rated at 10 or 20 percent in the case of a veteran who has been determined under 38 U.S.C. 3106 to have a serious employment handicap; or, a person who was discharged or released from active duty because of a service-connected disability.

Veteran of the Vietnam Era: A person who served on active duty for a period of more than 180 days, and was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty occurred: in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or, between August 5, 1964, and May 7, 1975, in all other cases; or, was discharged or released from active duty for a service-connected disability if any part of such active duty was performed: in the Republic of Vietnam between February 28, 1961, and May 7, 1975, or between August 5, 1964, and May 7, 1975, in all other cases.