



7700 Clocktower Drive  
Kirtland OH 44094-5198

## APPLICATION FOR EMPLOYMENT

As an equal opportunity employer, Lakeland Community College recruits and selects individuals for employment without regard to race, color, national origin or ancestry; sex, sexual orientation, marital and/or parental status, age, religion, disability or veteran status. We value the talents and contributions of a diverse workforce and encourage applications from under-represented groups. Persons with a disability requiring special accommodations to participate in the application or interview process may call 440-525-7575 or send an e-mail to: [hrjobs@lakelandcc.edu](mailto:hrjobs@lakelandcc.edu).

<b>IDENTIFICATION</b>	Application Date _____		
Name: _____			
(Last) _____	(First) _____	(M.I.) _____	
Address: _____			
(Street) _____	(City) _____	(State) _____	(Zip) _____
Telephone: _____			
(Day) _____	(Evening) _____	(E-mail) _____	

Are you applying in response to a vacancy posting or classified advertisement? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," for what position are you applying? _____ If "No," what position(s) are you seeking? _____	Are you able to provide documentation of legal authorization to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
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<b>AVAILABILITY</b> – Desired schedule (please check all that apply):	
<input type="checkbox"/> Full-time; year-round <input type="checkbox"/> Part-time; year-round <input type="checkbox"/> Full-time; 9-10 months/year <input type="checkbox"/> Part-time; 9-10 months/year	If seeking part-time employment, what number of hours per week can you work? _____

<b>EDUCATION RECORD</b> – Please indicate highest completed in each category:			
<b>High School</b>	<b>College</b>	<b>Graduate School</b>	
Diploma or GED?	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/>	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>COLLEGE</b>		Major	Credits Earned or Degree Conferred
Name			
Address			
Name			
Address			
Name			
Address			
<b>BUSINESS, TRADE, or VOCATIONAL SCHOOL</b>		License or Certificate	
Name			
Address			
Name			
Address			

**EMPLOYMENT HISTORY** - Please provide information for all employment within the past 10 years, starting with the most recent employer. Account for all periods including unemployment and service in the armed forces. **Do not substitute a resume for this section.** You may attach additional pages if necessary.

Dates of Employment	Employer	Job Title
_____ to _____  <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Address	Supervisor
	Phone ( )	Final Salary
	Reason for Leaving	
	Major Duties: _____ _____	

Dates of Employment	Employer	Job Title
_____ to _____  <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Address	Supervisor
	Phone ( )	Final Salary
	Reason for Leaving	
	Major Duties: _____ _____	

Dates of Employment	Employer	Job Title
_____ to _____  <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Address	Supervisor
	Phone ( )	Final Salary
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	Major Duties: _____ _____	

Dates of Employment	Employer	Job Title
_____ to _____  <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Address	Supervisor
	Phone ( )	Final Salary
	Reason for Leaving	
	Major Duties: _____ _____	

Dates of Employment	Employer	Job Title
_____ to _____  <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Address	Supervisor
	Phone ( )	Final Salary
	Reason for Leaving	
	Major Duties: _____ _____	

**SUPPLEMENTAL INFORMATION** – Use this section to show evidence of meeting the qualifications for the position or providing information you would like to add for consideration.

*General Job-Relevant Information:*

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*Computer Hardware and/or Software; Other Tools and Equipment:*

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If you are applying for a position that **requires** a standard driver's license or a commercial driver's license to perform the essential duties of the job, please answer the following:

- Do you currently have a valid standard Ohio driver's license?  Yes  No
- Do you currently have a valid Ohio commercial driver's license?  Yes  No
- Do you currently or have you had, in the last five (5) years, a driver's license from another state?  Yes  No
- State: \_\_\_\_\_
- Has your driver's license been suspended or revoked within the last five (5) years?  Yes  No
- Have you had any traffic violations or accidents in the past five (5) years?  Yes  No

Have you been convicted of a crime significant for the position to which you are applying?  Yes  No

Have you been convicted of a felony of any nature and/or a misdemeanor of violence or moral depravity?  Yes  No

If you answered "Yes" to either of the above questions, please explain:

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*(A conviction record will not necessarily bar employment. Factors such as your age at the time of the crime, seriousness of the crime, and nature of the crime in relation to the position are taken into consideration.)*

Have you previously been employed by Lakeland?  Yes  No If yes, please list:

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

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

Do you have immediate family employed at the College?  Yes  No If yes, please list:

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

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

**REFERENCES** - List three professional/work references from positions held within the last ten years.

Name _____ _____	Company	Title/Position
	Address	Affiliation (Work Relationship)
	Phone ( )	No. of Years Known
	Email address	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____ _____	Company	Title/Position
	Address	Affiliation (Work Relationship)
	Phone ( )	No. of Years Known
	Email address	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____ _____	Company	Title/Position
	Address	Affiliation (Work Relationship)
	Phone ( )	No. of Years Known
	Email address	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

**The following statement is a part of the application. Read carefully before signing.**

I certify that the answers I have made to all of the questions in this application are true and complete to the best of my knowledge. I understand that any material omission, misrepresentation or falsification of this information is sufficient cause for rejection of my application or termination of my employment.

I understand that any offer of employment is conditional upon proof of legal authorization to work in the United States as required by the Immigration Reform and Control Act.

I hereby authorize representatives of Lakeland Community College to obtain background information about me including but not limited to verification of education, investigation of present and past employment, and review of criminal convictions. I also give consent for representatives of Lakeland Community College to obtain a Driver's Abstract Report from a state in which I have held a standard or commercial driver's license in the past five years if driving is an essential function of the position. I understand that I may be considered ineligible for employment if my driving record does not meet the standards of Lakeland Community College and/or its insurer. I release Lakeland Community College and its representatives from liability for seeking such information and all sources for furnishing such information.

By checking the box at the left, I certify that I have read and agree with the above statements.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_