



## APPLICATION FOR EMPLOYMENT

**Notice of Non-Discriminatory Policy**

Lawrence Technological University adheres and conforms to all federal, state, and local civil rights regulations, statutes, and ordinances. No person, student, faculty, or staff member will knowingly be discriminated against relative to the above statutes. Lawrence Technological University is an Equal Opportunity Employer.

**Notice of Disability Services**

In compliance with Section 504 and the Americans with Disabilities Act (ADA), those applicants requiring reasonable accommodation to the application and/or interview process should notify the Office of Human Resources for assistance.

Inquiries or complaints may be addressed to the Office of Human Resources; please call 248.204.2151 for assistance.

Position you are applying for: \_\_\_\_\_ Today's date: \_\_\_\_\_  
 Desired annual salary or rate \$ \_\_\_\_\_ Date available to start if hired: \_\_\_\_\_

**1 Personal Information**

Name \_\_\_\_\_  
Last First Middle Initial

Mailing Address \_\_\_\_\_  
Street City State Zip

Telephone \_\_\_\_\_  
Home Business Alternate

Social Security No. \_\_\_\_\_ Email Address \_\_\_\_\_

Type of employment desired? (Check all that apply)  Full-time  Part-time  Temporary  Day  Evening

Have you previously been employed by Lawrence Tech?  Yes  No If yes, supervisor's name: \_\_\_\_\_

Referral source:  Advertisement  Employment Agency  Associate  LTU Website  LTU Employee  Other \_\_\_\_\_

Verification of U.S citizenship or immigration status is required prior to employment.

Are you currently legally eligible to work in the United States?  Yes  No If yes, check one box below  
 Unrestricted  Practical training only

Are you 18 years or older?  Yes  No If you are under 18, can you furnish a work permit if it is required?  Yes  No

Can you perform the essential functions of the job applied for, with or without a reasonable accommodation?  Yes  No

**Note:** The position for which you are applying may require a security clearance. The fact that you admit to a conviction record does not necessarily mean that your application will be rejected or that you will be barred from employment. However, if a false answer is found at any time after you are on the job, you will be dismissed.

Have you been convicted of or pleaded guilty to a felony?  No  Yes (If yes, explain) \_\_\_\_\_

Are there any felony charges pending against you?  No  Yes (If yes, explain) \_\_\_\_\_

Do you have a valid driver's license?  No  Yes Licence No. \_\_\_\_\_ State \_\_\_\_\_

**Person to be notified in case of emergency:** Name \_\_\_\_\_  
Last First  
 Address \_\_\_\_\_  
Street City State Zip  
 Telephone \_\_\_\_\_  
Home Business

## 2 Academic and Professional Preparation

Are you a high school graduate?  Yes  No  GED or equivalent Name of school: \_\_\_\_\_

Did you attend school under your present name?  Yes  No If no, please give name \_\_\_\_\_

List institution(s) attended (college, university, trade, vocational/technical, business, military, etc.)

Name and Address of Institution(s)	No. of Years Completed	Degree, Diploma, or Certifications Earned	Major Field of Study
.....			
.....			
.....			
.....			
.....			
.....			
.....			

Please list other skills/abilities or special training that you feel would qualify you for this position: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Note:** Consideration of application cannot be completed until the Office of Human Resources receives **Official Transcripts** of academic credentials.

## 3 Work Experience

List work experience beginning with the most recent. If additional space is needed, attach additional sheet(s) or your resume.

Dates (Mo./Yr.)		Employer #1	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time <input type="checkbox"/>	Full Time <input type="checkbox"/>			
Supervisor's name and telephone number				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of the work you performed				
Reason for leaving				

Dates (Mo./Yr.)		Employer #2	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time <input type="checkbox"/>	Full Time <input type="checkbox"/>			
Supervisor's name and telephone number				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of the work you performed				
Reason for leaving				

Work Experience (cont.)

Dates (Mo./Yr.)		Employer #3	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time <input type="checkbox"/>	Full Time <input type="checkbox"/>			
Supervisor's name and telephone number				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of the work you performed				
Reason for leaving				

Dates (Mo./Yr.)		Employer #4	Annual Wage or Hourly Rate of Pay	Job Title
From	To	Name and Address of Employer		
Part Time <input type="checkbox"/>	Full Time <input type="checkbox"/>			
Supervisor's name and telephone number				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of the work you performed				
Reason for leaving				

#### 4 Teaching Experience

Section 4 to be completed by faculty applicants only. Non-teaching applicants continue with Section 5.

Name and Address of Institution	Subject(s) Taught	Dates (Mo./Yr.)	
		From	To

List additional courses/areas you are qualified to teach \_\_\_\_\_

List areas of competency in research or creative activity \_\_\_\_\_

**Note:** Please attach a **curriculum vita** with information that will assist the University in determining your qualifications for appointment to a teaching position.

#### 5 Veteran Information

List branch, rank, and special training received in the Armed Forces \_\_\_\_\_

**6 Professional References (Excluding Relatives)**

Name and Address	Occupation	Years Associated	Phone Number(s)
..... .....			
..... .....			
..... .....			

**AUTHORIZATION**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein. I authorize that the references listed above may provide you with any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I am aware that, if hired, my employment is subject to the current *Faculty or Staff and Administrators Handbook* upon my receipt of such document.

I understand that the information that has been provided will be kept in confidence by Lawrence Technological University, its agents, and employees. I understand that the results of the information obtained as authorized by me in this document will not be released to any third party without my authorization or upon legal operation of law or court order.

**AT-WILL STATUS**

I agree that either party may terminate the employment relationship, with or without cause, at any time, for any reason, and I further accept that this agreement may be changed by the President and the Executive Vice President/Provost. I agree that I shall be bound by the University's other rules, policies, regulations, and the terms and conditions of employment as they are from time to time changed and that no additional obligations can be imposed by me on the University except those which have been acknowledged, in writing, by the President and the Executive Vice President/Provost. I further agree that my employment is conditional upon satisfactory completion of documentation as required by the Immigration Reform and Control Act of 1986.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

Please keep this survey separate from the Application for Employment and return it directly to the Office of Human Resources.

Office of Human Resources  
21000 West Ten Mile Road  
Southfield, MI 48075-1058  
800.CALL.LTU or 248.204.2151  
www.ltu.edu



**R E C R U I T M E N T   S U R V E Y**

Thank you for your interest in employment at Lawrence Technological University and for completing this survey.

Name \_\_\_\_\_  
Last First Middle Initial

Social Security No. \_\_\_\_\_ Desired Salary \_\_\_\_\_

Position applying for: \_\_\_\_\_

Referral source:  Advertisement  Employment Agency  Associate  LTU Website  LTU Employee  Other \_\_\_\_\_

Federal government regulations require Lawrence Technological University to maintain records of job applicants by gender and race. Providing this information below is strictly voluntary on your part and will be kept confidential by the University. Disclosure or refusal to provide this information will not subject you to any adverse treatment. To ensure that all applicants are treated fairly, this survey will be kept separate from your Application for Employment.

**Gender:**

Female  Male

**Ethnicity (check one):**

- American Indian 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.
- African-American (non-Hispanic).** All persons having origins in the Black racial groups of Africa.
- White (non-Hispanic).** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Hispanic.** All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- Asian or Pacific Islander.** All persons having origins in any of the original peoples of the Far East, Southeast Asia, Indian subcontinent, or Pacific Islands. This area includes, for example, China, Japan, Korea, the Phillipine Islands, American Samoa, India, and Vietnam.
- Other.** (Please specify.) \_\_\_\_\_

**Citizenship (check one):**

- U.S. Citizen
- Non-Citizen/Permanent Visa
- Non-Citizen/Student Visa
- Non-Citizen/Not Permanent or Student Visa
- Resident Alien

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