

Employer Information	Description of Duties and Responsibilities	May we contact this employer: Yes No	
Company		Title:	
Address		Salary:	
City, State, Zip		Start Date:	
Phone		End Date:	
Supervisor	Reason for Leaving	Hours per week	
Employer Information	Description of Duties and Responsibilities	May we contact this employer: Yes No	
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City, State, Zip		Start Date:	
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Special Qualifications: Indicate special studies, honors, experience, professional organizations to which you belong, offices held, special abilities, or any other information that would be helpful in considering your application as it relates to this position. (Attach additional page if necessary.)

General Information (please circle yes or no)

Have you ever been convicted of any felony or misdemeanor that resulted in imprisonment?	Yes	No	If yes, please attach written explanation
Have you been dismissed or asked to resign from a position?	Yes	No	If yes, please attach written explanation
After offer of employment, will you be able to provide documented proof of your legal right to work in the U.S.?	Yes	No	If no, please attach written explanation
Do you have any relatives currently working for the Lassen Community College District?	Yes	No	If yes, please attach written explanation

Applicant Certification and Waiver

I hereby certify that the statements on the application are true and complete to the best of my knowledge and belief. I understand that any false statements or omission of pertinent information shall be cause for dismissal.

I authorize Lassen Community College to investigate my employment and educational background and all of the statements contained in my employment application and materials submitted in conjunction with my application for employment. I further authorize my previous and current employers, as well as all educational institutions that I attended, personal and professional references and public or private agencies that have issued me either a professional or vocational license to release any and all records and other information maintained in their custody and control and which pertain to my employment relationship, history and educational background. I understand and acknowledge that this authorization will permit positive as well as negative information to be released. I hereby release from any liability all persons and organizations furnishing such information and hold Lassen Community College harmless for its investigation of my employability. Employees of Lassen Community College are required to submit to fingerprinting that will be checked by law enforcement agencies.

► Not valid unless signature appears here: _____
Applicant's Signature
Date

Pursuant to Section 504 of the Rehabilitation Act of 1973 as amended and Section I of the Americans with Disabilities Act, disabled persons who believe they need reasonable accommodations or help in order to apply or perform the necessary duties of a position may contact the Office of Human Resources at Lassen Community College (530) 251-8811. Lassen Community College is an Equal Employment Opportunity, Title IX, Section 504 Employer.

Lassen Community College Employment Application Information

1. To be considered an applicant for a position at Lassen Community College, all materials requested in the position announcement must be received no later than the application deadline.
2. SUBMISSION OF ALL MATERIALS IS THE APPLICANT'S RESPONSIBILITY. The College does not contact placement offices nor copy information from previous applications.
3. Applicants wishing to apply for more than one position should submit complete application packets for each position.
4. A committee will screen all applications. All initial interviews will be conducted after the date of the application deadline. Meeting the minimum qualifications for a position does not assure the applicant an interview.
5. In the interview, consideration will be given to factors other than education and experience, including, but not limited to, professional development, ability to work with others, and commitment to meeting student needs.
6. Applicants who are eliminated from final consideration during the selection procedure will be notified by letter.
7. The College reserves the right to contact the current or most recent employer and to investigate past employment records of applicants selected for interview.
8. Applicants will be notified after the Board of Trustees has acted upon the Superintendent/President's recommendation and may not begin working until approved by the Board at an open board meeting.
9. The College is required to maintain a file which would yield the composition of an applicant pool. The accompanying "Equal Employment Opportunity Form" provides the information for this purpose. Completing and returning this form is done on a voluntary basis by the applicant. The form is detached from the application and placed a composite file. This information is not part of the selection process.
10. The District reserves the right to re-advertise the position or to delay indefinitely the employment of a person for a position if it is deemed that applicants for the position do not constitute an adequate applicant pool.
11. The College does not return materials submitted in an application. Copies of original documents are acceptable.
12. Lassen Community College is an equal opportunity employer. Lassen Community College does not discriminate on the basis of race, color, sex, religion, national origin, age, handicap, veteran, marital status or sexual orientation or any other status or characteristic protected by applicable state or federal law in its employment practices. The policy of affording equal employment opportunities to all persons is in keeping with the provisions of the state and federal regulations which protect persons against discrimination.
13. Individuals selected for positions are required to complete the following PRIOR to employment:
 - Sign an Oath of Loyalty
 - Provide evidence of eligibility to be employed in the United States
 - Submit to and pass a fingerprint screening
 - Provide proof freedom of tuberculosis by x-ray or intra-dermal test

Equal Employment Opportunity Form
Completion of this form is voluntary.

The information on this form is for statistical purposes with regard to Equal Employment Opportunity Guidelines. Your cooperation in providing the requested information is kept separate and confidential. Completion of this form will neither enhance nor detract from your opportunity for employment with Lassen Community College.

Position applying for _____ **Date** _____

SEX (Please Check One): **Female** _____ **Male** _____

RACE/ETHNICITY (Please Check One):

____ **AMERICAN INDIAN/ALASKAN NATIVE:** Origins in any of the Native American Indian peoples of North America
Please specify tribal affiliation _____

____ **ASIAN/PACIFIC ISLANDER:**
____ Chinese: Origins in any of the original peoples of China
____ East Indian/Pakistani: Origins in any of the original peoples of the Indian sub-continent
____ Filipino: Origins in any of the original peoples of the Philippine Islands
____ Japanese: Origins in any of the original peoples of the Japanese Islands
____ West Asian: Origins of West Asian Americans from the Afghan, Arabian, Iranian, and Turkic Countries
____ Other Asian: Please specify _____

____ **BLACK/AFRICAN:** Origins in any of the Black racial groups of Africa

____ **HISPANIC:** Includes Black individuals whose origins are Hispanic
____ Mexican/Chicano: Persons of Mexican culture or origin, regardless of race
____ Latin American/Latino: Persons of Latin American, South American, Cuban, Puerto Rican culture, regardless of Race
____ Other Hispanic/Spanish: Persons of Spanish culture or origin, not included in any of the other Hispanic categories Above

____ **WHITE/CAUCASIAN:** Origins in any of the White racial or ethnic groups of Europe, North Africa, or the Middle East

CHECK ANY APPLICABLE:

____ **DISABLED:** Persons with a physical or mental impairment which substantially limits one or more major life activities, or who has a record of such impairment, or who is regarded as having such impairment.

____ **DISABLED VETERAN:** Persons entitled to disability compensation under laws administered by the Veteran's Administration for disability

____ **VIETNAM-ERA VETERAN:** Person who served on active duty for a period of more than 180 days, any part of which occurred between 8/5/64 and 5/7/75, and was discharged or released with other than dishonorable discharge, or was discharged or released from active duty for a service-connected disability, if any part of such active duty was performed between 8/5/64 and 5/7/75

____ **DISABILITY ASSISTANCE:** If assistance in the employment process is needed, please check or contact the Office of Human Resources at (530) 251-8811

HOW DID YOU LEARN ABOUT THIS POSITION:

____ Advertisement: Please specify source _____
____ Community Agency: Please specify _____
____ Friend or Colleague
____ Job Line
____ Professional Organization: Please specify _____
____ Self-Initiated
____ Special Recruitment
____ Vacancy Announcement
____ Other: Please specify _____