



SPRINGFIELD COLLEGE

Office of Human Resources
263 Alden Street
Springfield, MA 01109

Application for Employment

Springfield College considers applicants for all positions without regard for race, age, color, religion, gender, national origin, marital status, sexual orientation, or disability. Persons with disabilities who need assistance during the application process should contact the Office of Human Resources at 413-748-3118 or TTY 413-748-3629.

PLEASE PRINT

Personal Information

Name (Last, First, Middle)		Application Date:	
Mailing Address:	City:	State:	Zip:
Telephone Number:	Are you at least 18 years of age? ___Yes ___No Are you legally eligible for employment in the U.S.? ___Yes ___No <i>Proof of eligibility for employment will be required upon employment.</i>		
Another phone number where you can be reached/ message can be left:	E-mail address:		

Position Applied For:	Date Available:	Salary Requirements:
This application is in response to: (specify one) ___ Springfield Republican ___ Daily Hampshire Gazette ___ Hartford Courant ___ Chronicle of Higher Ed ___ Another Newspaper or Professional Publication Please specify: _____		___ SC Web Page ___ Job Opportunities Bulletin ___ Internet ___ Website: _____ ___ Friend/Relative Name: _____

Thank you for considering Springfield College as your prospective employer.

Employment Experience (Must be completed)

Start with your present or most recent employment first.

Employer:	Dates Employed From _____ To _____
Address:	
Job Title:	Hourly Rate/Salary Start _____ Final _____
Supervisor Name and Title:	Telephone #:
Description of Duties: _____ _____ _____	
Reason for Leaving: _____ _____	
May we contact this employer? _____ Yes _____ No	

Employer:	Dates Employed From _____ To _____
Address:	
Job Title:	Hourly Rate/Salary Start _____ Final _____
Supervisor Name and Title:	Telephone #:
Description of Duties: _____ _____ _____	
Reason for Leaving: _____ _____	
May we contact this employer? _____ Yes _____ No	

Thank you for considering Springfield College as your prospective employer.

Employer:	Dates Employed From _____ To _____
Address:	
Job Title:	Hourly Rate/Salary Start _____ Final _____
Supervisor Name and Title:	Telephone #:
Description of Duties: _____ _____ _____ _____	
Reason for Leaving: _____ _____	
May we contact this employer? _____ Yes _____ No	

Employer:	Dates Employed From _____ To _____
Address:	
Job Title:	Hourly Rate/Salary Start _____ Final _____
Supervisor Name and Title:	Telephone #:
Description of Duties: _____ _____ _____ _____	
Reason for Leaving: _____ _____	
May we contact this employer? _____ Yes _____ No	

Thank you for considering Springfield College as your prospective employer.

Summarize special skills and qualifications acquired from employment, military, or other experience or training which may be directly transferable to the job for which you are applying:

Education

Enter highest grade/level completed.

Grade School _____ High School _____ College _____ Graduate _____

High School	Location	Major	Degree	Dates Attended
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College	Location	Major	Degree	Dates Attended
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Graduate School	Location	Major	Degree	Dates Attended
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Vocational School	Location	Major	Degree	Dates Attended
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List formal or specialized training programs attended: _____

Professional References (List at least three)

NAME	LOCATION	OCCUPATION	PHONE NUMBER

Thank you for considering Springfield College as your prospective employer.

Are you related to anyone employed at Springfield College? Yes No. If so, please provide name: _____

Have you previously been employed at Springfield College? Yes No. If yes, please provide dates: From _____ To _____

If applicable, are you willing to work overtime? Yes No. Please state the hours you are unavailable to work: _____

Within the past five years have you ever been convicted of any unlawful offense (other than a first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace)? Yes No. If yes, please explain: _____

Agreement

1. I hereby certify that all information provided herein is true and complete to the best of my knowledge.
2. I understand that any false statements or omission of information in this application will be sufficient cause for disqualifying my application from consideration or for discharge if hired.
3. I hereby authorize the College to verify all statements contained in this application, and to contact and obtain information from all references, employers (except as limited herein), or any other persons or agencies having information that will assist the College in evaluating my suitability for employment. I request any duly constituted law enforcement agency, or judicial officer to furnish the College with all information at its disposal pertaining to any criminal conviction record on me. I hereby release the College, and any law enforcement agency, judicial officer, or other individual, from any liability arising from disclosure of said information.
4. Applicants accepted for employment should understand that while we make every effort to provide steady employment, we have no employment contracts, and we cannot guarantee the permanence of any position. Job tenure can be affected by many factors, including economic conditions, College policies, conformity to work rules, job performance, etc. Springfield College operates under the Employment At Will statute of the State of Massachusetts.

This is to certify that I have read, understand, and agree with the items listed above.

Applicant's Signature

Date

Thank you for considering Springfield College as your prospective employer.