Department of Human Resources
Employment Section
32 Canfield Administration
P.O. Box 880442
Lincoln, NE 68588-0442
(402) 472-2120

UNIVERSITY OF NEBRASKA-LINCOLN
Employment Application

EMPLOYER'S STATEMENT: The University of Nebraska-Lincoln is subject to state and federal equal employment opportunity laws which prohibit discrimination on the basis of gender, age, disability, race, color, religion, marital status, veteran's status, national or ethnic origin, or sexual orientation. Federal law requires reasonable accommodation of the known disabilities of applications and employees, unless to do so would pose an undue hardship. If you need an accommodation in order to complete the application process or take any required tests, please let us know.

INSTRUCTIONS TO APPLICANT: This document is the chief source of information for referring you to departments with job openings. Therefore, it is necessary that you clearly and completely state your interests and qualifications on your application form.

Applications are retained under active status for twelve (12) months.

Social Security Number ☐☐☐ ☐☐ ☐☐☐☐	Type of Work Desired (CHECK ALL THAT APPLY) ☐ Full-Time ☐ Part-Time ☐ Regular ☐ Temporary
Applicant's Name (Last, First, Middle Initial)	Position(s) Applied For
Street Address	email address
City, State, Zip	Home Telephone Number ( ) / Work/Message Telephone Number ( )

GENERAL INFORMATION

Are you at least 18 years old? ☐ Yes ☐ No

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Proof of employment eligibility will be required upon hire.

Do you have any relatives employed at UNL? (If yes, give names & departments) ☐ Yes ☐ No _____

Have you ever worked for UNL? ☐ Yes ☐ No If yes, give dates and departments: _____

Do you claim preference under the Vietnam Era Veteran status? ☐ Yes ☐ No

EMPLOYMENT RECORD

List your present or most recent employer first. Include U.S. Armed Forces and volunteer experiences.

Resumes are accepted but may NOT be substituted for the following information. Completely fill out each section of the employment record and give detailed information. If additional space is needed, please ask for a supplemental form.

May we contact your current employer? ☐ *Yes* ☐ *No* ***UNL will conduct references with previous employers.***

EMPLOYMENT INFORMATION	*DESCRIPTION OF DUTIES*
EMPLOYER	Position Title / Number Supervised
Address, City, State	Description of Duties:
Immediate Supervisor / Phone No. ( )	
Dates of Employment (Month, Year) FROM: TO: / Ending Salary $	
Total Time Employed: Years: Months: / Hours Worked Per Week	
Reason for Job Change	
EMPLOYER	Position Title / Number Supervised
Address, City, State	Description of Duties:
Immediate Supervisor / Phone No. ( )	
Dates of Employment (Month, Year) FROM: TO: / Ending Salary $	
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EDUCATION RECORD

Circle last grade completed in elementary or high school 1 2 3 4 5 6 7 8 9 10 11 12 ☐ GED

Name and location (City/State) of last high school:

NAME & LOCATION OF SCHOOL	Dates Attended		Credit Hours Completed	Did You Graduate?	Degree Earned	Curriculum	
	From	To				Major	Minor
College or University				☐ Yes ☐ No			
Graduate or Professional				☐ Yes ☐ No			
Other Schools (Business, Technical or Military)				☐ Yes ☐ No			

ADDITIONAL INFORMATION

List any certificates, licenses, special skills, qualifications, training, and language skills you have acquired along with specialized equipment you can operate.

Have you ever been convicted of a violation of the law other than a minor traffic violation? ☐ Yes ☐ No

Note: A conviction record is not an automatic bar to employment. Each case is considered in relation to the position applied for.

If Yes, please explain: _____

I certify that the information contained in this application is true to the best of my knowledge and belief. I understand that any material omission of facts or misrepresentation may result in my discharge, if hired, regardless of when discovered. Unless otherwise expressly stated in a written appointment to a position or in a written contract of employment duly approved and executed by UNL, regular office/service and managerial/professional employees are considered employees at will, and either UNL or the employee may terminate the employment relationship upon giving the proper advance notice. I grant permission to the University of Nebraska-Lincoln to investigate my employment record, educational record, criminal record, and other records to verify the information I have provided on this application and/or any additional information I have provided and release the University from any liability resulting from such investigation.

Signature _____ Date _____

NOTE: UNSIGNED APPLICATIONS WILL NOT BE CONSIDERED