

BARNARD COLLEGE

Columbia University

Application for Employment

It is the policy of Barnard College to recruit, hire, assign, train, transfer, demote, promote, lay off, and compensate employees at all levels and in all areas of the College on the basis of merit and ability and without discrimination because of race, color, religion, age, sex, national origin, marital status, sexual orientation, disability, or any other legally protected status.

Date of Application

Name: Last	First	Middle	Social Security Number	Home Phone Number: () ()
				Business Phone Number: () ()

Permanent Address	Apt. No.	City or Town	State	Zip Code
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Referral Source: Please name Source		Position Desired:	<input type="checkbox"/> Full-time
<input type="checkbox"/> Self	<input type="checkbox"/> Ad Print _____		<input type="checkbox"/> Part-time
<input type="checkbox"/> Employee	<input type="checkbox"/> Ad Online _____	Have you previously been employed by Barnard College?	
<input type="checkbox"/> Agency	<input type="checkbox"/> Barnard Website	<input type="checkbox"/> Yes <input type="checkbox"/> No	From ___/___/___ To ___/___/___

Is any member of your family currently an employee of Barnard College?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship:	Position held:
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Are you Legally eligible to work in the United States? Yes No

Education

Type of School	Name and Address of School	Major Fields Studied	Number of Years Completed	Did you Graduate? Yes No	Degree, Diploma or Certificate Received

Office and Technical Skills

Typing <input type="checkbox"/> Yes <input type="checkbox"/> No	Data Entry <input type="checkbox"/> Yes <input type="checkbox"/> No	Word Processing <input type="checkbox"/> Yes <input type="checkbox"/> No	Spreadsheets <input type="checkbox"/> Yes <input type="checkbox"/> No
W.P.M. _____	On what system(s)?	On what program(s)?	On what program(s)?

Technical or professional Skills or Licenses: Accounting, Programming Languages, Skilled Crafts, Lab Skills, Other. Explain

Safety and Security Training/Licensure *(Security Guard applicants only)*

Do you have a current New York State Security Guard License? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a current valid New York State Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you completed the 16 hour Security Guard training program? <input type="checkbox"/> Yes <input type="checkbox"/> No
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References

Please list **work** references below. List individuals who can discuss your past work. Do not list friends or relatives.

Full Name (last name first)	Occupation	Relationship to you	Address (street, city, state, zip code)	Business Phone Number

Do you authorize Barnard to secure REFERENCES on your performance and ability from your	(A) Present Employer <input type="checkbox"/> Yes <input type="checkbox"/> No
	(B) Former Employer(s) <input type="checkbox"/> Yes <input type="checkbox"/> No

Turn Page and Complete Other Side

Employment History

Previous Employment	Present or Last Job Dates Held (Month/Year)	Second to last job Dates Held(Month/Year)	Third to Last Job Dates Held (Month/Year)	Fourth to Last Job Dates Held (Month/Year)
Dates Held	___/___ to ___/___	___/___ to ___/___	___/___ to ___/___	___/___ to ___/___
Company Name				
Company Address				
Position				
Description of Duties Performed				
Supervisor's Name and Title				
Reason for Leaving				

Salary History for Above Positions

	Present or Last Job	Second to Last Job	Third to Last Job	Fourth to Last Job
Last Salary	\$ _____ per	\$ _____ per	\$ _____ per	\$ _____ per

Additional Information

Have you ever been convicted or plead guilty to a crime? Yes No If yes, explain:

Use the space below to summarize any additional information necessary to describe your qualifications.

Thank you for completing this application form and for your interest in Barnard College. Before you sign below, please read the following statement:

I certify the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, false information, misrepresentations, or omission of facts on this application shall be considered sufficient cause for dismissal. I authorize Barnard College to make an investigation of my history. I understand that if I am employed I will be required to present proof of my date of birth.

Date _____ Signature _____

**Barnard College
Human Resources
3009 Broadway, Room 6
New York, NY 10027**