



**LOYOLA
UNIVERSITY
NEW ORLEANS**

EMPLOYMENT APPLICATION

This application is active for 90 days, after which it must be renewed in order to be considered for other vacancies. Complete all fields of the application. Incomplete applications may not be processed.

LOYOLA UNIVERSITY NEW ORLEANS IS AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER.

Loyola University New Orleans has fully supported and fostered in its educational programs, admissions, employment practices, and in the activities it operates the policy of not discriminating on the basis of age, color, disability, national origin, race, religion, sex/gender, or sexual orientation. This policy is in compliance with all applicable federal regulations and guidelines.

PLEASE PRINT AND FILL IN ALL BLANKS. PLEASE USE BLUE OR BLACK INK.

Date: _____

Name: _____
Last First Middle

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell or Alternate Phone: _____ E-mail Address: _____

Position(s) applying for: _____

Date available for work: _____ Minimum acceptable salary: \$ _____

How were you referred to Loyola? _____

Have you ever been employed at Loyola? Yes No

If yes, in what department? _____

Dates employed: _____ Reason for leaving: _____

List any relatives who currently work at Loyola: _____

EMPLOYMENT HISTORY

PLEASE COMPLETE THE FOLLOWING, EVEN IF YOU ARE ATTACHING A RESUME. ALL FIELDS MUST BE COMPLETED IN ENTIRETY FOR CONSIDERATION.

1. Employer		DATES EMPLOYED From To		Work Performed
Address		Month/Year	Month/Year	
City State Zip				
Telephone Number				
Job Title		BASE HOURLY RATE/SALARY		
Supervisor		Starting	Final	
Reason for Leaving				
2. Employer		DATES EMPLOYED From To		Work Performed
Address		Month/Year	Month/Year	
City State Zip				
Telephone Number				
Job Title		BASE HOURLY RATE/SALARY		
Supervisor		Starting	Final	
Reason for Leaving				
3. Employer		DATES EMPLOYED From To		Work Performed
Address		Month/Year	Month/Year	
City State Zip				
Telephone Number				
Job Title		BASE HOURLY RATE/SALARY		
Supervisor		Starting	Final	
Reason for Leaving				
4. Employer		DATES EMPLOYED From To		Work Performed
Address		Month/Year	Month/Year	
City State Zip				
Telephone Number				
Job Title		BASE HOURLY RATE/SALARY		
Supervisor		Starting	Final	
Reason for Leaving				

Have you ever worked under a different name for an employer? Yes No

If yes, please identify the employer and the name you used: _____

Can you perform the essential functions of the job for which you have applied? Yes No

If accommodations are needed, please describe:

EDUCATION

Name and Location	Course of Study	Did you graduate?	Degree/Diploma
High School			
Technical/Trade or Business School			
College			
Graduate Work			

You will be required to show proof of above education.

EXPERIENCE/SKILLS/TRAINING

Please check all of the following that apply:

Microsoft Word Microsoft Excel Microsoft PowerPoint Microsoft Access

Hardware: _____

Software Programs (specify): _____

List any special training or skills (languages, machine operation, etc.) that would be of special benefit in jobs for which you are applying:

Are you of legal age to work in the United States? Yes No

Are you legally eligible for employment in the United States? Yes No

(As a condition of employment, it is required to submit proof of identity and legal right to work in the United States on the first day of employment.)

Have you ever been convicted of or plead guilty to any crime? Yes No

(A conviction will be considered only as it relates to fitness to perform the job being sought.)

If yes, explain fully:

Have you ever been disciplined, involuntarily terminated (fired), or asked to resign from a position? Yes No

If yes, explain fully:

APPLICANT'S RELEASE AND REFERENCE AUTHORIZATION

The university does not discriminate in hiring or employment on the basis of age, color, disability, national origin, race, religion, sex/gender, or sexual orientation. No question on this application is intended to secure information to be used for such discrimination. This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

I further understand that nothing in this employment application, in the university statements, or Human Resources guidelines, or in my communications with any university official, is intended to create an employment contract between the university and me. I also understand that the university has the right to modify its policies without giving me any notice of the changes. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the university unless it is made in writing and signed by a university official. If an employment relationship is established, I have the right to terminate employment at any time for any reason. I understand the university retains this same right.

I authorize Loyola University to make inquiries deemed necessary for the purpose of evaluating my application for employment. I also authorize previous employers, or any other person to whom the university or its insurers may refer, to give any and all information regarding my employment or scholastic record, together with any other information, personal or otherwise.

I further understand that misrepresentation or omission of any fact or circumstance called for in this application which would affect my application unfavorably or receipt of unsatisfactory references will be sufficient cause for termination of my employment, if I shall have been employed, without liability to me for salary except as may have been earned at the time of my termination.

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably.

I hereby acknowledge that I have read the above statements and understand the same.

Signature:

Date:
