



Application For Athletic Corporation, California State University, Fresno Employment

Employment Services Provided by: California State University, Fresno, Human Resources
 Joyal Administration Building, Room 211
 5150 North Maple Avenue, M/S JA71, Fresno, CA 93740-8026
 Telephone Numbers: Job Line (559) 278-6653, Fax (559) 278-4275, Human Resources (559) 278-2032
www.fresnostate.edu/hr/

Rev.8/10

POSITION TITLE: _____

SPORT OR

DEPT. NAME: _____

VACANCY#: _____

NAME: _____
(Last) (First) (M.I.)

Previous last name(s)? If any, please list _____

Applicants will be notified only if selected for an interview.

ADDRESS: _____
(Number) (Street)

TELEPHONE NUMBERS:

HOME: _____ MESSAGE: _____

FAX: _____ EMAIL: _____

(City) (State) (Zip)

Athletic Corporation is a computer literate organization. Managers and staff rely heavily on computers for handling daily communication and office workflow for all positions. Regardless of the type of position for which you are applying, please indicate your level of competence.		Expert	Competent	Some Experience	No Experience	Software Used
	WORD PROCESSING					
	SPREADSHEET					
	DATABASE					
	EMAIL					
	INTERNET/WEB					
	GRAPHICS					

Even though some of the following information may be supplied in an attached resume, please complete the summary below to fully facilitate processing your application.

EDUCATION LEVEL (Check the highest level attained)

Less than high school diploma Associate degree Year _____ Institution _____
 High school graduate/G.E.D. Bachelor's degree Year _____ Institution _____
 Technical school diploma Master's degree Year _____ Institution _____
 Some college Doctorate Year _____ Institution _____
 Some graduate school Professional degree, e.g., M.D., D.D.S., J.D. Year _____ Institution _____

Certificates or Licenses required by position (Including CA Driver License) Title: _____ License No.: _____ Issuing State: _____ Date Issued: _____ Date Expires: _____
 _____ Title: _____ License No.: _____ Issuing State: _____ Date Issued: _____ Date Expires: _____

Have you ever left employment under unfavorable circumstances? Yes No If yes, please explain _____

RELEVANT EMPLOYMENT HISTORY

All applicants must complete Sections I, II and III below in full,
in addition to submitting other application materials if required by the vacancy announcement.

I. Employment History (List most recent first)

II. Responsibilities and Contacts

A. Organization: _____
 Department: _____
 City: _____ State: _____
 Start Date: _____
 End Date: _____
 Total # Yr. ____ Mo. ____ Monthly Salary: _____
 FT Perm Temp PT Perm Temp
 Reason for Leaving: _____

Title: _____
 Responsibilities: _____

 Supervisors will not be contacted until the applicant is notified of the decision to check references.
 Contact Supervisor: _____
 Phone Number(s): _____

B. Organization: _____
 Department: _____
 City: _____ State: _____
 Start Date: _____
 End Date: _____
 Total # Yr. ____ Mo. ____ Monthly Salary: _____
 FT Perm Temp PT Perm Temp
 Reason for Leaving: _____

Title: _____
 Responsibilities: _____

 Contact Supervisor: _____
 Phone Number(s): _____

C. Organization: _____
 Department: _____
 City: _____ State: _____
 Start Date: _____
 End Date: _____
 Total # Yr. ____ Mo. ____ Monthly Salary: _____
 FT Perm Temp PT Perm Temp
 Reason for Leaving: _____

Title: _____
 Responsibilities: _____

 Contact Supervisor: _____
 Phone Number(s): _____

III.

I affirm that all responses and statements in this application for employment are complete and true. I understand that any false statement or omission may be cause for rejection of my application or for my discharge after appointment. Fingerprinting will be required for certain position classifications. I authorize the release of reference information from individuals familiar with my educational and work background to the Athletic Corporation. I understand this information is considered confidential and the content of any reference will not be made available to me.

I ALSO UNDERSTAND THAT, IF HIRED, I MUST PROVIDE DOCUMENTATION ATTESTING TO MY IDENTITY AND LEGAL RIGHT TO WORK IN THE UNITED STATES, AS REQUIRED BY THE IMMIGRATION REFORM AND CONTROL ACT OF 1986. If hired, I agree that my employment and compensation can be terminated at will, without cause, and with or without notice, at any time, either at my option or at the option of the Athletic Corporation. I understand that no employee or representative of the Athletic Corporation has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

Signature of Applicant _____ Date _____ Note: Offers of staff employment are contingent upon willingness to sign the Loyalty Oath.



ATHLETIC CORPORATION
California State University Fresno

APPLICANT FLOW
INFORMATION

Dear Applicant:

The Athletic Corporation of California State University Fresno is an Equal Opportunity/Title IX employer and is required by the U.S. Department of Health, Education and Welfare to compile information concerning the ethnic background and gender of all applicants for employment. Your cooperation in completing and returning this confidential supplement to your application is respectfully requested.

You are at liberty to either provide or not provide the information requested below. However, you may be assured that all information will be used for statistical and analytical purposes only. None of the information provided will either enhance or detract from your opportunity for employment with the Athletic Corporation, nor will it become a part of any personnel file or be made available to persons making employment decisions. Thank you.

Today's Date: _____

1. **Please identify the vacancy for which you are applying.** **Vacancy Announcement No.** _____

A. **Position Title:** _____

Department: _____

2. **Indicate by checking the appropriate box how you learned of vacancy:**

- | | | |
|--|---|--|
| <input type="checkbox"/> University vacancy announcement | <input type="checkbox"/> Fresno State Employee | <input type="checkbox"/> Jobline |
| <input type="checkbox"/> Newspaper advertisement | <input type="checkbox"/> Fresno State Former Employee | <input type="checkbox"/> University Web site |
| <input type="checkbox"/> Employment Development Department | <input type="checkbox"/> Relative / Friend | <input type="checkbox"/> Open House |
| <input type="checkbox"/> Professional Conference | <input type="checkbox"/> Journal | <input type="checkbox"/> Executive Search |
| <input type="checkbox"/> Other _____ | | |

3. **Gender:** Male Female

4. **Age:** 18 years or older Yes No
 40 years or older Yes No

5. **Veteran Status:** Veteran of the Vietnam-era Special Disable Veteran
 Other Eligible* None of the Above

*A veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge was authorized.

6. **Ethnic Group:**

- American Indian / Alaskan Native
- Asian / Pacific Islander
- Black
- Hispanic
- White

Office Use Only
