

Emergency Hire and Short Term Appointment Employment Application Instructions

This application is <u>not</u> to be used to apply for positions posted on the Sonoma State University Job Opportunities page. Applicants must apply through the online system for all positions posted on the Sonoma State University <u>Job Opportunities</u> page.

Please complete all required information fields, sign and return to:

Human Resources, Employment Services Sonoma State University 1801 East Cotati Avenue Rohnert Park, CA 94928-3609

> hr@sonoma.edu (707) 664-3196 fax

To receive future correspondence from the Human Resources department, including confirmation that your application was received, please provide an email address on the first page of your application.

Sonoma State University is an Affirmative Action/Equal Opportunity Employer. We consider qualified applicants for employment without regard to race, religion, color, national origin, ancestry, age, sex, gender, gender identity, gender expression, sexual orientation, genetic information, medical condition, disability, marital status, or protected veteran status.



EMERGENCY HIRE AND SHORT TERM APPOINTMENT APPLICATION FOR STAFF EMPLOYMENT

A completed employment application is required for each desired position. Materials submitted with your application will not be returned. Associated Students is an Equal Opportunity Employer.

Date:							
EMPLOYMENT INTEREST							
Reference Number:			Jol	o Title:			
Date Available:							
Are you available to work: Full-time Part-time Temporary On-Call							
Have you ever applied at this facility?							
	PERSONAL DATA						
Name: (Last)		(First)		(Middle)	Social Sec XXX-XX-	curity Number:(last 4 digits only)	
Address:					Home Tele	-	
City:	State: Zip Code: Email Address:				Message/Office Telephone:		
			Required for future of	correspondence.	() - May we contact you at this number? ☐ Yes ☐ No		
Are you over 18 years of age? Yes No Can you will be required to furnish proof that you are legally authorized to work in the United States.							
Indicate names used for em	nployment	or education					
Name:				School:			
Name:			Company/				
Have you ever been emplo			fornia or the Cali			∐ Yes ∐ No	
If yes, which agency or colle	ege:			Position he	eld:		
Dates:							
		RE	FERENCE INFO	RMATION			
From what specific source of							
Newspaper publication					ther (specify)):	
Internet: CSU Job Opportunities SSU Job Opportunities Other Web site(specify):							
☐ E-Job Alert							
☐ Employee of Sonoma State University (name):							
Journal publication (name of publication):							
Employment Developm	ent Depar	tment					
SSU job line							
Other (please specify):							
SKILLS PROFILE							
Adva	nced	Intermediate	Beginner	Software Used		Hardware Used	
Word Processing							
Spreadsheet							
Database							
E-Mail							
Internet/Web							
Graphics							
Other Skills:	<u>-</u>						

EMPLOYMENT HISTORY

Please fill out completely.

List all employment activity for the past 10 years, starting with your most recent position. Also include any volunteer work which relates to the job for which you are applying. If you were unemployed for any period, state the nature of your activities. As your work experience is an important factor in determining a position for which you are best suited, please complete this application carefully. If you need additional space, please add additional sheets.

Dates (month & year)	Name of Employer:	Your Title:
From:		Duties:
То:		
Total Years Worked:	Address:	
City, State, & Zip Code:		
Telephone Number: () -	
		Reason for leaving or wishing to leave:
Name and Title of Imme	diata Suparvisar:	
	uiate supervisor.	May we contact this employer? ☐ Yes ☐ No
		I way we contact this employer? \square res \square no
Dates (month & year)	Name of Employer:	Your Title:
From:	rvarrie er Empleyer.	Duties:
To:		Builes.
Total Years Worked:	Address:	
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City, State, & Zip Code:		
City, state, & zip code.		
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Telephone Number: () -	Decree Code of the contribute to the code
		Reason for leaving or wishing to leave:
Name and Title of Imme	diate Supervisor:	
		May we contact this employer? ☐ Yes ☐ No
Dates (month & year)	Name of Employer:	Your Title:
From:	Name of Employer:	Your Title: Duties:
	Name of Employer:	
From:	Name of Employer: Address:	
From: To: Total Years Worked:		
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		ATION HISTORY GH SCHOOL				
Туре	Nar	City & State				
Some high school	TVGT	The of cornect	ony a state			
☐ High school graduate/G.E.D.						
COLLEGE						
Туре	Field of Study	Name of School	City & State			
☐ Some college						
Associate degree						
☐ Bachelor's degree						
☐ Some graduate school						
☐ Master's degree						
☐ Doctorate degree						
☐ Professional degree						
		ERTIFICATE				
Туре	Field of Study	Name of School	City & State			
Professional certificate						
☐ Trade or Craft certificate						
	OTHER REQU	JIRED INFORMATION				
Do you have any relatives working	for Sonoma State Univers	ity? 🗌 Yes 🗌 No				
Name(s):		Department(s):				
Relationship(s):		•				
I choose to waive my right to receive copies of all public records that may be obtained regarding me as a result of my						
application for employment with Sonoma State University (e.g., records documenting an arrest, indictment, conviction, civil						
judicial action, tax lien, or outstand	ding judgment). 🗌 Yes 🗀	No				
The position for which you applied may require the use of a state vehicle for state business. Should you be offered and accept a Sonoma State University position, can you furnish a current, valid California Driver's License? Yes No						
Please indicate any additional info	ormation you consider per	tinent to your application for employme	nt.			
APPLICANT STATEMENT						
I understand that Sonoma State University will verify the statements I have made regarding my academic background, employment history, and any criminal convictions, which may be on my record. I give Sonoma State University consent to conduct a criminal record check. I authorize my past employers and schools to give Sonoma State University pertinent work-related information about me. I also understand that all offers of appointment are contingent upon receipt of satisfactory verification of information.						
I certify that the answers given in the materials I have submitted in application for this position are true and correct and that I have not knowingly withheld any facts or circumstances. I understand that all answers given in my application for employment are subject to verification and that should I be employed at Sonoma State University, any misrepresentation or omission of facts on this application may be sufficient reason for dismissal. The application materials include this document and any other materials submitted.						
If employed, I understand that, except as may be modified by an applicable collective bargaining agreement and/or California State Statute, my employment may be ended at any time, at the option of either Sonoma State University or myself for any reason, with or without advance notice. This understanding cannot be changed, except in writing by the Vice President for Administration and Finance.						
Print Name:						
Signature:		Date:				

Sonoma State University's annual security report includes statistics for the previous three years concerning reported crimes that occurred on campus, in certain off-campus buildings or property owned or controlled by Sonoma State University and on the public property within, or immediately adjacent to and accessible from the campus. The report also includes institutional policies concerning campus security, alcohol/drug use, crime prevention, reporting of crimes, sexual assault and other matters. To obtain a copy of this report, please visit http://www.sonoma.edu/ps/psannualreport.html or contact Police and Parking Services at (707) 664-2143.

Mandated Reporting Requirement

This position may be considered a "mandated reporter" under the California Child Abuse and Neglect Reporting Act and is required to comply with the requirements set forth in CSU Executive Order 1083 as a condition of employment.

Campus Safety Reports

Jeanne Clery Act - Annual Security Report: Sonoma State University's Annual Security Report includes statistics for the previous three years concerning reported crimes that occurred on campus, in certain off-campus buildings or property owned or controlled by Sonoma State University and on the public property within, or immediately adjacent to and accessible from the campus.

The report also includes institutional policies concerning campus security, alcohol/drug use, crime prevention, reporting of crimes, sexual assault and other matters. http://www.sonoma.edu/housing/ download copy of this report at general-info/emergency-prep/fire-safety.html or receive a copy by contacting Police and Parking Services at (707) 664-4444.

Campus Housing Fire Safety Report:

Sonoma State University's Annual Campus Housing Fire Safety Report, in compliance with The Campus Fire Safety Right-to-Know Act, contains information about fire statistics, fire safety systems, and safety practices and standards for campus housing. The Campus Housing Fire Safety Report is available at www.sonoma.edu/housing/general_info/fire_safety or you can contact Housing Services at (707) 664-2541 to receive printed information or additional information.

Smoke-Free Campus

Sonoma State University is proud to be a smoke-free campus within the California State University System. Effective July 1, 2015, Smoking and other uses of tobacco products, such as smokeless tobacco, the use of e-cigarettes and similar devices, are prohibited on Sonoma State owned, controlled or leased property, as well as in vehicles owned, leased, or rented by the University, parking lots and residential space.

Per federal requirements, you are also required to present 2 forms of identification to comply with the Immigration Reform and Control Act of 1986 (driver's license, passport, social security card, birth certificate). A complete list of other acceptable documents can be found on page 9 of the I-9 Form. A map of the campus is also attached for your convenience, alternatively you can find interactive maps online @ www.sonoma.edu/maps.



Applicant Authorization and Release Form

l,	, wis	h to be	considered	l for e	employmen ^a
with Sonom	a State University (SSU). I hereby authorize SSU ar	ıd its age	ents to inquire	e abo	ut and verify
all statemer	nts contained in my employment application an	d to obta	ain informati	on co	ncerning my
qualification	ns as a prospective employee. Further, I authorize	SSU to co	ontact each	of my	current and
former emp	loyers and the references listed herein. I also au	thorize e	ach of my e	emplo	yers and the
references I	listed herein to give SSU any and all information	concerr	ning my pre	vious (employmen
and any pe	ertinent information they may have regarding	my work	k performan	ce, w	hether such
information	is favorable or unfavorable to me. I hereby fully re	elease all	such person	is and	entities from
all liability v	vith respect to furnishing such information to SS	SU, and w	waive any c	claims	I may have
0	m with respect to the release of such information				
	it information as necessary to those employees	9			•
	to investigate or to make a decision with res	pect to	any matter	perta	aining to my
employmen	it.				
l acknowled provisions.	dge that I have read this authorization and release, fully	y understa	and it and volu	untarily	agree to its
	Printed Name:	Jo	b ID:		
	Signature:				