



The Association
OF FORMER STUDENTS®

The Association of Former Students of Texas A&M University

APPLICATION FOR EMPLOYMENT

It is the policy of The Association of Former Students of Texas A&M University that in all aspects of its operations each person shall be considered solely on the basis of qualifications, without regard to race, color, sex (including pregnancy), religion, national origin, age, disabilities, genetic information, veteran status or leave status.

In compliance with the Americans with Disabilities Act, if accommodations are needed for the application process, please inform the Human Resources Department.

IDENTIFICATION

Last Name	First	Middle Initial	Position(s) applying for:
Mailing Address	City	State	Zip
			Preferred telephone: Home/Cell () Business ()

Email address: _____		I can work the following (check one or more): <input type="checkbox"/> Fall <input type="checkbox"/> Mornings (8 a.m. - 12 p.m.) <input type="checkbox"/> Spring <input type="checkbox"/> Afternoons (12 p.m. - 5 p.m.) <input type="checkbox"/> Summer <input type="checkbox"/> Evenings (after 5 p.m.) <input type="checkbox"/> Weekends Estimated Graduation (for student positions): _____
Have you ever worked for The Association of Former Students? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give final date and department:		
Date you can begin work:	If your age is below 18 years, give date of birth:	

Are you legally eligible to be employed in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of identity and eligibility will be required upon employment)	Do you have a valid drivers license? <input type="checkbox"/> Yes <input type="checkbox"/> No
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EDUCATION AND TRAINING

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED	Give name and address of last high school attended:	
Name and location of college, university, business or trade school:	DEGREES AWARDED Title: Major field:	
Major field(s) of study/training:	Minor field(s) of study/training:	Number of college credit hours completed:

EXPERIENCE

Start with your present or last position and work back, including military experience. If you were ever employed in any position under a different name, give the name used: _____

Check if you prefer we do not contact your current employer prior to a job offer.

Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: ()				Immediate Supervisor: Name _____ Title _____ Telephone No: ()		Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer <input type="checkbox"/> Temp <input type="checkbox"/> If part-time: Give average number of hours worked per week. ____ hrs/week	
Starting Date		Leaving Date		Final Salary:		If you were a supervisor: Give number of employees you supervised. _____ employee(s) supervised	
Mo.	Yr.	Mo.	Yr.				

Summary of experience:

Specific reason for leaving: _____

Position Title: Employer: Mailing Address: City and State/Zip: Employer's Telephone No: ()				Immediate Supervisor: Name _____ Title _____ Telephone No: ()		Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer <input type="checkbox"/> Temp <input type="checkbox"/> If part-time: Give average number of hours worked per week. ____ hrs/week	
Starting Date		Leaving Date		Final Salary:		If you were a supervisor: Give number of employees you supervised. _____ employee(s) supervised	
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Mo.	Yr.	Mo.	Yr.				
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Mo.	Yr.	Mo.	Yr.				
Summary of experience:							
Specific reason for leaving: _____							

How did you learn about university job opening(s)?				<input type="checkbox"/> Association Website	<input type="checkbox"/> Non-Assoc. Website
<input type="checkbox"/> Cable TV	<input type="checkbox"/> Radio	<input type="checkbox"/> Newspaper Advertisement		<input type="checkbox"/> Professional Journal	
<input type="checkbox"/> Dial-a-Job	<input type="checkbox"/> Friend	<input type="checkbox"/> Texas Workforce Commission		<input type="checkbox"/> Employment Office	
<input type="checkbox"/> Internet	<input type="checkbox"/> Job fair	<input type="checkbox"/> Other _____			

SKILLS INVENTORY

Fill in appropriate skills.

Computer/office skills (e.g. types of software, office equipment, cash register, etc):

Licenses, Certifications: _____

Foreign Languages: _____

Equipment skills (e.g. printing, electronic, general labor, etc):

CONVICTION RECORD

Have you ever been convicted of a violation of any local, state or federal law, other than minor traffic violations? (This includes a plea of guilty or no contest.) No Yes

If yes, list ALL convictions below, from the oldest to the most recent:

Date of Conviction (Month and year)	Mark appropriate box:		Offense (Do not use abbreviations.)
	Misdemeanor	Felony	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

SIGNATURE REQUIRED

I certify the statements made by me in this application are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statement made herein will void this application and any actions based upon it. I agree to revise this application should any of the information change. I authorize The Association of Former Students or any of its components to make reference checks relating to my employment and I also authorize all prior employers to provide full details concerning my past employment. I understand that this application and all attachments are the property of The Association. I understand that in the event I am employed, the first six months of my employment are probationary. I also understand that if I am eligible for overtime under provisions of the Fair Labor Standards Act, all hours I work in excess of 40 in a work week will be recorded in a compensatory time bank, at time and a half, unless management elects to pay me at time and a half. Furthermore, that I can take compensatory time off so long as my doing so would not unduly disrupt the activities of my department and my supervisor approves such absence. Unused overtime compensatory time will be paid upon termination of employment. I understand that if I am male, I am required to sign a Certification of Registration Status for the Selective Service as a requirement for employment. I further understand that if I am a male age 18 through 25, I must show proof of registration with Selective Service at the time of hire. I understand that any offer of employment is contingent upon my completing the Immigration and Naturalization Service Employment Eligibility Verification (Form I-9) and providing documents to verify my identity and employment eligibility as required by law. When completing the Form I-9, I will be required to attest that I am a citizen or national of the U.S., a lawful Permanent Resident or an alien authorized to work.

Date of Application: _____ *Signature: _____

*Please print completed application and physically sign document before submitting.

PLEASE SUBMIT TO:

The Association of Former Students
505 George Bush Drive
College Station, Texas 77840

Phone: (979) 845-7514 Email: HumanResources@AggieNetwork.com