



For Official Use Only	
Date	By
Attn. of	
Attn. to	
Checked	

Application for Employment

Personal

Date _____

Name _____
Last First Middle

Address _____ Phone () _____

City _____ State _____ Zip _____ E-mail _____

How long have you been at this address? _____ Do you have the legal right to work in the United States? yes no

If your application is considered favorably, on what date will you be available for work? _____

Previously employed by BJU? yes no If yes, when? _____ On what basis? faculty staff student

What prompted you to seek employment at Bob Jones University? _____

Briefly describe why you believe you could be an asset to Bob Jones University: _____

What do you consider to be the single most important event in your life? _____

What do you consider the second most important event in your life? _____

Have you ever been convicted of a felony? yes no

Education

High school: _____ Graduated? yes no

College or technical training:

Degree held	School name and address	Major(s) & number of hours	Minor(s) & number of hours

If applying for a teaching position, please have official transcripts of all college work sent to BJU, Attn: Provost.

List any special work toward a degree or other special training (indicate school where taken):

Honors Received: _____

List any Professional Certificates or Licenses which you hold: (If teaching certificate, indicate level and subjects)

Type of Certificate or License	Issuing State	Number

Work Preference/Job Skills

What type of work do you prefer? 1 _____ 2 _____

Please list proficient job skills: 1 _____ 2 _____ 3 _____

Note: If you are going to drive a University vehicle, you must meet the University driving requirements and skills test.

Work Experience

If you are presently employed, may we contact your employer? yes no

List all employers you have had during the **past five years**, starting with present or most recent employer:

■ 1.	Firm	Address		
	City	State	Zip	
	Phone ()	Fax ()	E-mail	
	Position/Responsibilities			
	Supervisor		Contact Person	
	Reason for leaving		Dates employed	
	■ 2.	Firm	Address	
City		State	Zip	
Phone ()		Fax ()	E-mail	
Position/Responsibilities				
Supervisor		Contact Person		
Reason for leaving		Dates employed		
■ 3.		Firm	Address	
	City	State	Zip	
	Phone ()	Fax ()	E-mail	
	Position/Responsibilities			
	Supervisor		Contact Person	
	Reason for leaving		Dates employed	

References

Name of present church		Present pastor's name		
Address		City	State	Zip
Phone ()	Fax ()	E-mail	Attended since	

If you have attended your present church less than one year, list your previous church:

Name of previous church		Previous pastor's name		
Address		City	State	Zip
Phone ()	Fax ()	E-mail	Period attended	

List three persons who are well acquainted with you, not including relatives, former teachers, or anyone listed above:

■ 1.	Name	Phone ()	E-mail	
	Address	City	State	Zip
■ 2.	Name	Phone ()	E-mail	
	Address	City	State	Zip
■ 3.	Name	Phone ()	E-mail	
	Address	City	State	Zip

No employee other than the president of Bob Jones University or his authorized representative has the authority to enter into an employment contract with any employee, and any employment contract entered into must be in writing.

The facts set forth in my application for employment are true and complete. I understand that if I am employed, any false statement on this application may result in my dismissal. I further understand that this application is not, and is not intended to be, a contract of employment, nor does this application obligate BJU in any way if BJU decides to employ me. I understand and agree that my employment is on an at-will basis.

I believe in the inspiration of the Bible (both the Old and the New Testaments); the creation of man by the direct act of God; the incarnation and virgin birth of our Lord and Savior, Jesus Christ; His identification as the Son of God; His vicarious atonement for the sins of mankind by the shedding of His blood on the cross; the resurrection of His body from the tomb; His power to save men from sin; the new birth through the regeneration by the Holy Spirit; and the gift of eternal life by the grace of God.

Signed: _____

Date _____

***Please note: Incomplete applications will be rejected.**

I understand that Bob Jones University may obtain information through one or more investigations as part of the procedure for processing my application for employment. Such investigations may be conducted utilizing the services of a consumer reporting agency or on Bob Jones University's own initiative without use of a consumer reporting agency, which may include an investigation into my credit background, references, character, past employment, work habits, education, general reputation, personal characteristics, mode of living, civil judgments, liens, and information about my criminal conviction background consistent with federal and state law. I also understand if I am hired, Bob Jones University may obtain further information through subsequent investigations either through use of a consumer reporting agency or on its own initiative without use of a consumer reporting agency so long as I remain an employee of Bob Jones University.

I understand a consumer reporting agency's investigation may include obtaining information covering up to the last seven years, regarding my credit background, references, character, past employment, work habits, education, general reputation, personal characteristics, mode of living, civil judgments, and liens, as well as any information about my criminal conviction background consistent with federal and state law.

In the event an investigative consumer report is conducted, I understand such information may be obtained by personal interviews with my neighbors, friends or associates or with others whom I am acquainted or who may have knowledge concerning my character, general reputation, personal characteristics or mode of living. I understand such information may also be obtained through direct or indirect contact with former employers, schools, financial institutions, landlords and public agencies or other persons who may have such knowledge.

I understand that I have the right to receive notice about the nature and scope of any investigative consumer report requested within five days after Bob Jones University received my request or five days after the investigative consumer report was requested, whichever is later.

By checking the box, I indicate that I wish to receive further disclosure about the nature and scope of any Bob Jones University request for an investigative consumer report.

I acknowledge that I have received a summary of my rights under the Fair Credit Reporting Act.

I also understand that before I am denied employment based, in whole or part, on information obtained in the consumer or investigative consumer report, I will be provided a copy of the report and a description in writing of my rights under the Fair Credit Reporting Act. I understand if I disagree with the accuracy of any information in the report, I must notify Bob Jones University within five business days of my receipt of the report. If I notify Bob Jones University within five business days of the receipt of the report that I am challenging information in the report, Bob Jones University, will not make a final decision on my employment status until after I have had a reasonable opportunity to address the information contained in the report.

I hereby consent to this investigation and authorize Bob Jones University or a consumer reporting agency designated by Bob Jones University to procure a consumer report and/or an investigative consumer report on my background as stated above.

Signature of Applicant

Date

Print Name

Social Security #

Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you such as if you pay your bills on time or have filed bankruptcy – to creditors, employers, landlords and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681-1681u, at the Federal Trade Commission's website (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you – such as denying an application for credit, insurance or employment must tell you, and give you the name, address and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs – to which it has provided the data of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If any item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address, and phone number of the information source.

You can dispute inaccurate items with the source of the information. If you tell anyone – such as a creditor who reports to a CRA – that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, if it may not continue to report the information it is, an fact, an error.