



# OKLAHOMA CITY UNIVERSITY

## APPLICATION FOR FACULTY POSITION

**Include all required documents***Electronic submission of documents preferred*

- ☐ OCU Application  
☐ Letter of Application  
☐ Curriculum Vitae

Complete all sections – do not write “*see vitae/résumé*.”

Attach a letter of application and curriculum vitae. Upon submission, your curriculum vitae will become part of the official application and is therefore governed by the Memo of Understanding printed on page 4. This form must be submitted as part of the application process.

**Applicant Name:**

LAST

FIRST

MI

**Date:****Indicate the type(s) of position(s) for which you are applying:**

☐ Full-Time Faculty    ☐ Part-Time Faculty

**Specific position for which you are applying:**

TITLE

DEPARTMENT

**Date available to begin work:**

*Oklahoma City University provides equality of opportunity in higher education for all persons, including faculty and employees, with respect to hiring, continuation, promotion, and tenure, applicants for admission, enrolled students, and graduates, without discrimination or segregation on the ground of race, color, religion, national origin, sex, age, handicap or disability, sexual orientation, or veteran status.*

*The Vice President for Administration and Finance, located in Room 402 of the Clara E. Jones Administration Building, telephone (405) 521-5029, coordinates the university's compliance with titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Age Discrimination in Employment Act.*

**Personal Information****Address:**

STREET

APT/PO BOX

CITY

STATE

ZIP

**Social Security Number:****Home Telephone:**

Business:

Ext.:

Fax:

Cell:

**E-mail:****Alternate E-Mail:****Are you a U.S. Citizen?** ☐ Yes ☐ No**If not a U.S. citizen, are you currently eligible to work in the United States?** ☐ Yes ☐ No**Country of Origin:****Please provide your visa type:****Status:****Expiration date:**

## Educational History

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List all degree-granting institutions of higher education attended.

University/College	City, State	Dates Attended	Major/Field of Study	Degrees Completed

## Professional References

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List three references with direct knowledge of your professional work. Provide all information requested for each. Do not include relatives or employers already listed in *Employment History*.

Name and Title	Home Address /Email Address	Telephone	Relationship	Years Known

## Curriculum Vitae

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Attach curriculum vitae which will include: all teaching qualifications, with specific courses taught, where and when, as well as other courses qualified to teach; a bibliography of publications and/or research, including titles of master's thesis and/or doctoral dissertation; and, other career information. List academic honors you have received, including scholarships, fellowships, prizes, and honorary scholastic societies to which you have been elected. (Please identify titles which are not self-explanatory.)

## Employment History

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**List all previous positions, starting with the most recent.** For positions held more than ten years ago, list only employer, dates and title. *Use additional copies of this page, if necessary.*

Employer:	Title Held:
Address:	Telephone:
Immediate Supervisor and Title:	
Dates Employed	from: to:
Job Summary	
Reason for Leaving:	

Employer:	Title Held:
Address:	Telephone:
Immediate Supervisor and Title	
Dates Employed:	from to
Job Summary	
Reason for Leaving:	

Employer:	Title Held:
Address:	Telephone:
Immediate Supervisor and Title	
Dates Employed:	from to
Job Summary	
Reason for Leaving:	

Employer:	Title Held:
Address:	Telephone:
Immediate Supervisor and Title	
Dates Employed:	from to
Job Summary	
Reason for Leaving:	

Employer:	Title Held:
Address:	Telephone:
Immediate Supervisor and Title	
Dates Employed:	from to
Job Summary	
Reason for Leaving:	

## Applicant Questionnaire

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Have you ever been employed by Oklahoma City University?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date from: _____ to: _____ Position: _____		
Do you have a relative employed in any capacity by OCU?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, name and position of relative: _____		
Have you ever been known by, used or worked under any other name	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Previous name: _____		
Have you ever used or worked under any other Social Security number?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Previous Social Security number: _____		
Have you ever been denied tenure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been released or have you ever resigned from employment because of misconduct or unsatisfactory job performance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever resigned a position to avoid dismissal?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you submit proof of legal employment authorization and identity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted or received a deferred sentence for any violation of the law other than minor traffic offenses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date of conviction/deferred sentence: _____ (A conviction will not automatically bar employment)		
If yes, please explain: _____		
Are you currently on parole or probation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there charges pending against you other than minor traffic offenses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How did you learn of this position?		

**Carefully read and sign the following:**

### Memo of Understanding

I hereby authorize Oklahoma City University to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, references, and other individuals. I hereby release from liability Oklahoma City University and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that continued faculty employment is governed by the OCU Faculty Handbook and the tenure system. I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or cause for termination of employment as specified in the Faculty Handbook, whenever it may be discovered.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the Americans with Disabilities Act.

I also understand that if I am employed, I will be required to provide official transcripts, satisfactory proof of identity and legal work authorization. Failure to submit such documentation within the established time frame shall invalidate the offer of employment

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

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APPLICANT SIGNATURE

DATE

If preparing and submitting this application electronically, type initials in *Applicant signature* block as an e-signature. An application submitted with an e-signature will be considered an original and subject to all terms of the "Memo of Understanding."