

## Application for Employment

### Instructions

For questions concerning positions or the application process, please contact the Office of Human Resources at 828-339-4257

1. Complete application in its entirety (a resume may not be submitted in lieu of this application); incomplete applications may be rejected by the college.
2. For faculty positions, please attach an unofficial copy of transcript
3. Once hired, all employees must submit official transcripts, copies of licensure and/or certifications
4. If hired, applicants must be able to document U.S. citizenship or eligibility for employment.
5. E-mail application to [personnel@southwesterncc.edu](mailto:personnel@southwesterncc.edu), OR fax/mail application to number/address listed on top right corner of application.

### Date

Today's Date

### Applicant Name and Contact Information

Please print your full name as it appears on your Social Security card:

First Name	Middle Name (if applicable)	Last Name
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List preferred name (or nickname)	List any additional names used while employed or attending school
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Mailing Address

City	State	Zip
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Primary Phone Number <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home	Secondary Phone Number <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home	Other Phone Number <input type="checkbox"/> Cell <input type="checkbox"/> Work <input type="checkbox"/> Home
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**E-Mail Address**

### Positions of Interest

Indicate the position(s) for which you are applying:

1. <input type="text"/>	3. <input type="text"/>
2. <input type="text"/>	4. <input type="text"/>

Type of employment <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Either/Both	In which counties are you willing to work? <input type="checkbox"/> Jackson <input type="checkbox"/> Macon <input type="checkbox"/> Swain
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Do you have any commitments to another employer (including self-employment) that might affect your employment with the college (i.e. will you maintain another job if employed by Southwestern Community College)?  Yes  No

If yes, then please list days and times that would present a conflict:

Have you been previously employed by Southwestern Community College?  Yes  No  
If yes, then please list the position and the dates employed:

Do you have any relatives employed by the college?  Yes  No  
If yes, please list:

## Skills

Please list the following	Computer software in which you are proficient:
	Computer software in which you are familiar but not proficient:
	Keyboarding proficiency (if applicable):
	Equipment you can operate (as it relates to the position(s) for which you are applying):
Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please list the type/class _____ and the state of issue _____	
Please list professional licensure, certifications, or registered fields of work (include date(s) and source(s) for issuance)	

## Education

	Name & Location of School/College/University	Type of Degree Earned	Date Degree Earned	Major or Course of Study
High School		<input type="checkbox"/> Diploma <input type="checkbox"/> GED	<del>Do not list</del>	<del>Do not list</del>
Technical, Junior, or Community College		<input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> AA Degree <input type="checkbox"/> AAS Degree		
College or University		<input type="checkbox"/> BA, AB <input type="checkbox"/> BS <input type="checkbox"/> _____		
Graduate School		<input type="checkbox"/> MA <input type="checkbox"/> MS <input type="checkbox"/> MEd <input type="checkbox"/> _____		
Additional Education		<input type="checkbox"/> EdD <input type="checkbox"/> PhD <input type="checkbox"/> JD <input type="checkbox"/> _____		

## Military Service/Veteran's Preference

If declaring veteran's preference, please submit a Report of Separation (DD Form 214, Certificate of Release or Discharge from Active Duty, or similar form used by the military services).	Have you served in the Armed Forces of the United States on active duty, for reasons other than training, and been discharged under other than dishonorable conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Do you wish to declare a service-related disability? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Are you the surviving spouse or dependent of a deceased veteran who died from service-related reasons? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Do you wish to declare eligibility for veteran's preference as the spouse of a disabled veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please provide the following information regarding the qualifying active military service		
Dates of Service	Branch	Rank

HR Use Only: Eligible for veteran's preference?  Yes  No

**Experience** - Please list most current employer first (this section must be completed in its entirety).

Employer Name	Employer Address		Employer Phone Number
Your Job Title	Name of Supervisor		Title of Supervisor
Dates of Employment Begin Date                      End Date	Salary – Start	Salary - End	Type of Employment/Status <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Currently Employed
Job Description			
Reason for Leaving			Are you eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer Name	Employer Address		Employer Phone Number
Your Job Title	Name of Supervisor		Title of Supervisor
Dates of Employment Begin Date                      End Date	Salary – Start	Salary - End	Type of Employment/Status <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Currently Employed
Job Description			
Reason for Leaving			Are you eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No

Please indicate any employer you would prefer the college not to contact:

## Experience (continued)

Employer Name	Employer Address		Employer Phone Number
Your Job Title	Name of Supervisor		Title of Supervisor
Dates of Employment Begin Date                      End Date	Salary – Start	Salary - End	Type of Employment/Status <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Currently Employed
Job Description			
Reason for Leaving			Are you eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer Name	Employer Address		Employer Phone Number
Your Job Title	Name of Supervisor		Title of Supervisor
Dates of Employment Begin Date                      End Date	Salary – Start	Salary - End	Type of Employment/Status <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Currently Employed
Job Description			
Reason for Leaving			Are you eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No

Please indicate any employer you would prefer the college not to contact:

## **Education Philosophy Statement**

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Education is our mission. Southwestern Community College expects high standards from both faculty and staff in oral and written communications. Please write a statement concerning your personal philosophy of education, your philosophy toward the community college, and your philosophy in relation to your role in the community college.

## References

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Please include at least three professional/work references:

Name	E-mail Address	Primary Phone Number	Type of Reference
			Professional
			Professional
			Professional
			<input type="checkbox"/> Personal <input type="checkbox"/> Professional
			<input type="checkbox"/> Personal <input type="checkbox"/> Professional

## Additional Information

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Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, accomplishments, etc. Please **EXCLUDE** all information indicative of age, sex, race, religion, color, national origin, or personal disability.

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Thank you for your interest in the college. It is the goal of the college to strive for excellence and to find the best qualified people available. Although everyone who applies cannot be hired, your application will be given every consideration. Applications are kept on active file for one year unless updated by the applicant.

**Equal Opportunity Employer**

## Equal Employment Opportunity Information

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Southwestern Community College prohibits discrimination based on race, sex, color, creed, national origin, age, or disability. The information requested below will in no way affect you as an applicant. Southwestern Community College is required by the federal government to collect this information. It will be used to assess how well our recruitment efforts are reaching all segments of the population. This information will be filed separately from your application.

Date of Birth

Sex

\_\_\_\_\_

Female  Male

Ethnicity

Hispanic or Latino  Not-Hispanic or Latino

Race

If you checked "Not-Hispanic or Latino," then please select one or more of the race categories listed below:

White  Asian  
 Black or African American  American Indian or Alaska Native  
 Native Hawaiian or Other Pacific Islander

Please indicate how you learned of the position:

Southwestern Community College (SCC)  Franklin Press  
 SCC Employee  Smoky Mountain Times  
 NC Community College System Web site  Asheville Citizen Times  
 Employment Security Commission  Other newspaper or Web site  
 Sylva Herald  Other source

## Statement of Selective Service Registration Compliance

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Please select one of the following statements:

- I certify that I am not required to be registered with the Selective Service because:
- I am female.
  - I am in the armed services on active duty (Note: Members of the Reserves and National Guard not on full-time active duty must register).
  - I am under the age of 18.
  - I was born before 1960.
  - I am a permanent resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands.

I certify that I am registered with the Selective Service.

Print Name

Signature

Date

## CERTIFICATION AND AUTHORIZATION

I understand if I am offered a position that a criminal background check will be obtained as part of the pre-employment background investigation. This report will be provided by a consumer-reporting agency that has a contractual relationship with Southwestern Community College. Under the Fair Credit Reporting Act (FCRA), I am considered a "consumer," a "consumer reporting agency" is a business that for a fee regularly assembles consumer information to prepare a consumer report, and a "consumer report" for Southwestern Community College is a criminal background check (Please select the link to view a "Summary of Your Rights Under the Fair Credit Reporting Act").

I understand should I receive any offer of employment, I will be required to provide personal information required to complete the pre-employment background check including my accurate social security number, current address and date of birth. Failure to provide this information when requested will result in the withdrawal of any employment offer. I understand that this information is for the sole purpose of gathering the above information accurately and will not be used to discriminate against me in violation of the law.

I authorize Southwestern Community College and any agent of its choice to make any and all investigations to verify the information contained herein, including criminal records, educational credentials, and work experience. I consent to the release of any information maintained about me by all previous and current employers, educational institutions, law enforcement authorities, courts, licensing board or any other entity, agency, or individual which Southwestern Community College or its agents may contact to secure references or records. I release Southwestern Community College, its employees and its agents, the consumer reporting agency and its agents from any liability for conducting such investigation and/or records check. I understand that all information provided shall become the sole property of Southwestern Community College and may be used to determine my eligibility for employment.

I understand that, prior to employment, I must provide information related to identity and employability. Failure to provide appropriate documentation for verification of employment eligibility shall result in immediate termination of employment and/or offer of employment.

I certify the following:

**No**, I have **not** been convicted of or plead guilty to a misdemeanor or felony criminal offense

**Yes**, I have been convicted of or plead guilty to a misdemeanor or felony criminal offense

If yes, please explain (An affirmative answer will not automatically disqualify you from being considered as a candidate for employment. Please attach additional sheets if necessary for explanation.)

I certify that all of the statements in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I authorize the college or its designee to investigate all statements and information provided on this application or attached thereto. I understand that false information or the omission of relevant information may be grounds for rejection of my application and/or dismissal if employed. I release from all liability and agree to hold harmless, all former employers, references, and persons providing information about my experience, education and abilities. In signing this document, I hereby certify that I have read the above information to include the "Summary of Your Rights Under the Fair Credit Reporting Act," that I understand the above information, and that I agree to abide by these terms.

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Applicant's Name

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Applicant's Signature

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Date



## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.ftc.gov/credit](http://www.ftc.gov/credit) or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

<b>TYPE OF BUSINESS:</b>	<b>CONTACT:</b>
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Consumer Help (FRCH) P O Box 1200 Minneapolis, MN 55480 Telephone: 888-851-1920 Website Address: <a href="http://www.federalreserveconsumerhelp.gov">www.federalreserveconsumerhelp.gov</a> Email Address: <a href="mailto:ConsumerHelp@FederalReserve.gov">ConsumerHelp@FederalReserve.gov</a>
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture