



TOURO UNIVERSITY CALIFORNIA

Office of Human Resources

1310 Club Drive • Vallejo, CA 94592 • Phone: (707) 638-5200 • Fax: (707) 638-5927

APPLICATION FOR FACULTY EMPLOYMENT

TOURO UNIVERSITY CALIFORNIA IS AN EQUAL OPPORTUNITY EMPLOYMENT

GENERAL INFORMATION:

Date: _____

Position(s) applied for: _____ Salary Desired: \$ _____

Employment Desired: Full Time Part Time (FTE) _____ Temporary/Hourly Other _____

Referral source: Professional Journal Higher Education Jobs TUC Website Other source(s): _____

Do you have any friends/relatives at TUC: Yes No _____
Employee Name Relationship

Name: _____ -- --
Salutation (Last, First, Middle) Social Security Number

Address: _____
Street City/State Zip

Home Phone: (_____) _____ Email Address: _____

Other/Cell: (_____) _____

Are you at least 18 years of age? Yes No

If hired, what date you would be able to begin work? _____

Have you ever been employed with TUC? Yes No If yes, give date: _____

Are you authorized to work in the U.S.? Yes No

Have you ever been convicted of a crime? Yes No If yes, give date: _____

County/State: _____ Nature of conviction: _____

*(An Affirmative answer will not automatically disqualify you from being considered as a candidate for employment.
A criminal background check will be will be conducted as part of the screening process.)*

EDUCATION:

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	MAJOR	Completion/Date (Mo/Year)
Undergraduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No ___/___
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No ___/___
Medical/Professional School				<input type="checkbox"/> Yes <input type="checkbox"/> No ___/___
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No ___/___
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No ___/___

Terminal Degrees (MPH, DO, PhD): _____

Special Honors _____

LICENSE OR CERTIFICATE:

Answer the following questions if you are applying for a professional position:

Does the position you are applying for require a License or Certificate? Yes No

1) Type of License or Certificate: _____

Number: _____ Issuing State: _____ Expiration: _____

Has your license or certificate ever been suspended or revoked? If yes, give date? _____

Please describe: _____

2) Type of License or Certificate: _____

Number: _____ Issuing State: _____ Expiration: _____

Has your license or certificate ever been suspended or revoked? If yes, give date? _____

Please describe: _____

3) Type of License or Certificate: _____

Number: _____ Issuing State: _____ Expiration: _____

Has your license or certificate ever been suspended or revoked? If yes, give date? _____

Please describe: _____

CURRENT AFFILIATIONS:

OTHER SPECIAL SKILLS: Please list any special skills you may have, e.g., fluency in other languages, special training,

etc.: _____

EMPLOYMENT HISTORY: List below all present and past employment starting with your most recent employer (last ten years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Most recent employer: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Address:	Work Performed:
Dates of Employment: _____ _____ From To	Supervisor:	
Job Title:	Reason for leaving: If you are still employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone Number:
Employer: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Address:	Work Performed:
Dates of Employment: _____ _____ From To	Supervisor:	
Job Title:	Reason for leaving:	Phone Number:
Employer: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Address:	Work Performed:
Dates of Employment: _____ _____ From To	Supervisor:	
Job Title:	Reason for leaving:	Phone Number:
Employer: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Address:	Work Performed:
Dates of Employment: _____ _____ From To	Supervisor:	
Job Title:	Reason for leaving:	Phone Number:
Employer: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Address:	Work Performed:
Dates of Employment: _____ _____ From To	Supervisor:	
Job Title:	Reason for leaving:	Phone Number:

REFERENCES: Please list three <u>professional</u> references below:			
Name:			
Position:			
Company:			
Address:			
Phone Number:			
Relationship:			

WAIVER'S AND DISCLOSURES

Please read carefully, initial each paragraph and sign below

_____ I hereby authorize Touro University to thoroughly investigate my references, work record, education and
 Initials other matters related to my suitability for employment and, further, I authorize Touro University to investigate the references I have listed to disclose to Touro University any and all letters, reports and other matters related to my suitability for employment without giving me prior notice of such disclosure.

_____ I give permission to Touro University to conduct a criminal background check as part of the employment
 Initials process.

_____ I hereby release to Touro University, my former employers and all other persons, corporations,
 Initials partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to investigation or disclosure.

_____ I understand that the completion of this application does not suggest or affirm that this document
 Initials substitutes for an employment contract.

_____ I understand and agree that if I am employed, my employment is for no definite or determinable period and
 Initials may be terminated at any time, with or without prior notice, at the option of either myself or Touro University, and that no promises or representations contrary to the foregoing are binding on Touro University unless made in writing and signed by me and a Touro University designated representative.

I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ Date

_____ Applicant's Signature

Non-discrimination Policy: Touro University California does not discriminate on the basis of race, color, national origin, religion, gender, disability, age, sexual orientation, or any other characteristic protected by law in employment, or in admission, treatment or access to educational programs or activities.

Touro University is a smoke free campus.