

EMPLOYMENT APPLICATION PACKET

In order to be considered for employment with UAS, Inc., the following forms should be completed:

- 1. Employment Application (required)
- 2. Conviction Disclosure form (required)
- 3. Affirmative Action Survey (voluntary)

The information obtained from forms 1 and 2 is confidential and not a factor in consideration for employment.

Please submit all pages of this packet to:

Human Resources Management California State University, Los Angeles 5151 State University Drive Los Angeles, Ca. 90032-8534

Email: jobopenings@cslanet.calstatela.edu

Human Resource Management Use Only

Date sent	Date returned
🗆 FCRA disclosure signe	ed



CAL STATE L.A. UNIVERSITY AUXILIARY SERVICES, INC.

Position Title:					
Reference Number:		Date available	e to start work:		
Name: Mr. Ms. Dr. (<i>Last</i>)		List other names your references a	s used to assist us in checking and background	3	
(First)					
(Middle)					
Home Phone	ome Phone Cell Phone Bu		Phone	May we contact you at work?	
Street Address		i		Apt. no.	
City		State	Zip		
E-mail Address					
Can you provide verification of your	right to work in the U.S? 🔲 Y	es 🗌 No			
Are you at least 18 years of age?	Yes No				
Are you related to anyone employed by Cal State L.A. or UAS? Yes No If yes please provide the following: (use separate sheet if more than one relative)					
Name Relationship C			epartment		
Were you previously employed by UAS? Yes No If yes, when and where?					

EMPLOYMENT HISTORY - List present or most recent employment first. Include any volunteer work that relates to the position for which you are applying. If you were unemployed for any period, state the nature of your activities. Attach additional sheets if necessary. Please complete this section, even if accompanied by a resume.

Name of Present or Last Employer (Company Name)			lame)	Address:	Telephone:
					()
Employed: (month/year)	From	То		Describe Duties:	
Position Title PT FT					
Name & Title of Immediate Supervisor					
Reason for Leaving Salary					
May we contact employer? Start Final					

Name of Previo	us Employer (Com	pany Name)			Telephone:
Address:					()
Employed: (month/year)	From	То		Describe Duties:	
Position Title		-	PT FT		
Name & Title of	Immediate Supervi	isor			
Reason for Lea	ving	Sal	ary		
May we contact		Start	Final		
Name of Previo	us Employer (Com	oany Name)		Address:	Telephone:
Employed: (month/year)	From	То		Describe Duties:	
Position Title			PT FT		
Name & Title of Immediate Supervisor					
Reason for Lea	ving	Sal	ary		
May we contact		Start	Final		
Name of Previo	us Employer (Com	pany Name)		Address:	Telephone:
					()
Employed: (month/year)	From	То		Describe Duties:	
Position Title			PT FT		
Name & Title of	Immediate Supervi	isor			
Reason for Lea	ving	Sal	ary		
May we contact	t employer? No	Start	Final		

EDUCATION - List schools attended (include military training and/or related courses)

High School Attended (name and location)			
Secondary education (name and location)	Total Credit Hours	Degree Earned	Major/Minor Subject

Please note: For positions that require a degree, an official copy of your transcript will be required upon employment.

OTHER QUALIFICATIONS

Have you entered into any agreements with any former employer or other entity (for example, an agreement not to
compete or a confidentiality agreement) that may affect your ability to work for UAS? Yes 🗌 No
If you answered "yes" please provide us with a copy of any such agreement(s)
Can you Travel if required by the positions? Yes
Do you have a vehicle available for your use if needed for the position? Yes No
If you have qualifications which especially equip you to work with culturally diverse and/or minority groups and
multi ethnic programs please include a description:

REFERENCES - List three professional references

Name of Reference	Title of Reference	Name of Institution	Work Address	Business Telephone

UAS is an equal opportunity employer subject to all state, federal and CSU regulations pertaining to nondiscrimination based on race, national origin, religion, disability, marital status, age, veteran status, pregnancy, gender, and sexual orientation. Upon request, reasonable accommodation will be provided to individuals with protected disabilities to complete the employment process and perform essential job functions.

Do you require reasonable accommodations to perform the essential functions of the position? Yes	No
If Yes please describe:	

THIS APPLICATION IS NOT COMPLETE UNTIL SIGNED, AND ALL STATEMENTS BELOW HAVE BEEN READ CAREFULLY

- I understand that this application is not intended to create, nor should it be construed to create, an express or implied contract of employment for any specified period. If hired, I will be employed at will; I understand that this means that either I am or UAS is free to terminate the employment relationship at any time with or without cause or prior notice.
- I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for will result in refusal to hire me or, if I am hired, will result in my dismissal at any time regardless of when the false answer or omissions are discovered.
- I understand that no representative of UAS other than the Executive Director has any authority to enter into an agreement for employment for any specified period of time or in any way to modify the at-will nature of the employment relationship. I understand that if I am offered employment, I may be required to sign a non-solicitation and non-disclosure agreement as a condition of employment. I further understand that, at a minimum, such agreement will prohibit the use and disclosure by me of certain information that I have acquired during my employment.
- I also understand that as a condition of employment, I may be required to enter into an arbitration agreement with the Company, whereby disputes regarding my employment will be resolved by arbitration and not in court.
- I understand that if I am considered for a driving position, I may be subject to all DOT regulations as they may apply to the position, including those regulations regarding physical examinations, and drug and alcohol testing procedures.
- I understand that employment is contingent upon the receipt of documents verifying employment eligibility.

Signature of Applicant _____

Date _____

REFERENCE CHECK AUTHORIZATION

I hereby authorize any former employer or educator to furnish University Auxiliary Services, Inc. a reference and all information pertaining to me while I was an employee/student of the organization. A photocopy of this authorization shall be deemed as valid as the original.

Name _____

Signature _____

Date



CAL STATE L.A. UNIVERSITY AUXILIARY SERVICES, INC.

You are required to give information on all felony or serious misdemeanor convictions. A conviction includes a plea, verdict or finding of guilt, regardless of whether sentence was imposed by the court. Misdemeanor convictions for possession of marijuana that are more than two years old need not be listed. Minor traffic citations and incidents which occurred before your 18th birthday may be excluded.

This form shall be retained in the UAS Human Resources Office and will not be made available to the hiring department.

Have you ever been convicted of	a felony or of any crime for which you served a jail or
prison sentence? Yes 🔲 No 🗌	(A conviction record will not necessarily be a bar to employment. Factors
such as, age and time of offense, seriousness a	Ind nature of violation and rehabilitation will be taken into account)

If yes, please explain

re you currently out on bail or released on your own recognizance with respect to a urrent arrest? Yes No
ame (please print)
ignature
ate



CAL STATE L.A. UNIVERSITY AUXILIARY SERVICES, INC. **AFFIRMATIVE ACTION SURVEY FORM** (voluntary)

DEAR APPLICANT:

UAS is interested in reaching the broadest possible group of qualified applicants. We continuously monitor the effectiveness of our recruiting efforts by collecting important data required for compliance with various State and Federal reporting.

Completing this form will be most helpful to us in carrying out our administrative responsibilities. Return of this form is entirely voluntary. This form shall be retained in the UAS Human Resources Office and will not be made available to the hiring department. Thank you for your cooperation!

Please provide the information requested below:

Position applied for:	

	Gender:		Male		Female
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- **ETHNIC ORIGIN:** Please click the box corresponding to the ethnic origin with which you most closely identify. Click one box only.
- Black (Not Hispanic) Person of Black African descent.
- Asian Person of Japanese, Chinese, Korean, Vietnamese, Asian Indian, Thai or similar descent other than Pacific Islander or Filipino.
- Hispanic Person of Mexican, Puerto Rican, Cuban, South or Central American or other Spanish descent.
- White (Not Hispanic) Person of European, North African or Middle Eastern descent.
- Pacific Islander Person of Hawaiian, Samoan, Guamanian, Polynesian, Fiji or Tahitian descent.
- Native American Person of American Indian, Eskimo, or persons of origins in any of the original peoples of North America.
- Filipino Person of Filipino descent.
- Unknown

REFERRAL SOURCE:

Current CSULA/UAS Employee
Word of Mouth
Job Bulletin/Walk-in
Community/Prof Org
Other:

Chronicle
UAS HR Website
L.A. Times
Daily News

CHECK IF APPLICABLE:

Vietnam Veteran Dates of Service: _____ A Vietnam era veteran is a person who served on active duty for more than 180 days between August 5, 1964 and May 7, 1975.



Disability Rating:

A disabled veteran is a person entitled to disability compensation under the laws administered by the Veterans Administration for disability rated at 30 per centum or more, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.