
Name of Employer: _____ Job Title: _____

() _____
Phone Number Current Address City State Zip

Name of Supervisor: _____ Date Started: _____ Date Left: _____

Responsibilities:

Reason for leaving: _____

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() _____
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EMPLOYMENT REFERENCES

Give names and numbers of three professional references that we may contact.

<i>NAME</i>	<i>PHONE NUMBER</i>	<i>EMAIL ADDRESS</i>	<i>OCCUPATION /RELATIONSHIP</i>

EDUCATIONAL BACKGROUND: *Complete this section even if you are attaching a résumé.*

UNDERGRADUATE/GRADUATE SCHOOL OR TECHNICAL SCHOOL (list most recent first):

Name of School	City/State	From:	To:	Degree	Major

GENERAL INFORMATION

Have you ever attended Cornish College of the Arts? Yes No

If yes, list dates attended: _____

Have you ever been employed by Cornish College of the Arts? Yes No

If yes, what position did you hold? _____

Are any of your family members or relatives employed by Cornish College of the Arts? Yes No

If yes, please state their name, relationship and position:

(Note: Existence of a conviction record is not necessarily a bar to employment)

ABILITY TO PERFORM JOB FUNCTIONS

Having read the job posting, are you able to perform all physical and mental job-related functions of the position(s) for which you have applied, with or without reasonable accommodations? Yes No

OPTIONAL SECTION

Briefly explain why you believe you are qualified for the position for which you are applying, and how you think your skills and experience would benefit Cornish College of the Arts.

PLEASE READ THE FOLLOWING AND SIGN YOUR NAME

AN EQUAL OPPORTUNITY EMPLOYER

We do not discriminate on the basis of gender, race, religion, national origin, age, sexual orientation, disability, veteran status or any other reason prohibited by law. It is our intention that all applicants be given equal employment opportunity and that selection decisions are based on job-related factors.

1. I understand that employment at Cornish College of the Arts is at-will and that either I or the College may terminate the employment relationship at any given time with or without cause or notice. If I am employed by the College, I will comply with all employment-related policies and requirements set forth by the College.
2. I certify that all answers to questions in this application and all additional information I may have submitted are true and complete to the best of my knowledge. I understand that giving false information, misrepresentation or omission of facts may be grounds for denial of employment or discharge if hired.
3. I hereby acknowledge that I have read and understand the above statements. I voluntarily give Cornish College permission to confirm by personal inquiry, or otherwise, information provided in this application. I release from all liability or responsibility this College and all persons, companies, or corporations providing information to the College about me.

Applicant's Signature

Date