



PERSONAL INFORMATION

Name: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____ OSU ID #: _____

Are you under the age of 18? [] Yes [] No

Are you a U.S. citizen, permanent resident, or authorized to work in the United States? [] Yes [] No

Do you have a current, valid driver's license? [] Yes [] No (Issuing State: _____)

Indicate equipment you operate which may be used in the type of employment you are seeking (e.g., office equipment, copiers, computers, machine tools, vehicles, electronic equipment, etc.)

AVAILABILITY

Hours Available to Work:

Table with 7 columns (Sunday-Saturday) and 2 rows (From, To)

What date would you be available to start work? _____

How many hours per week are you looking to work? _____

POSITION FOR WHICH YOU ARE APPLYING? (Check all that apply)

- [] Security Officer [] Alarm/Video Monitor [] Bus Driver
[] Traffic Control Officer [] Administrative/Clerical [] Other: _____

EDUCATION

Please circle the highest year of education completed:

Secondary: 8 9 10 11 12 College/Vocational: 1 2 3 4 Assoc BA BS MA PhD

Name of Schools Attended:

High School: _____ Study Focus: _____

College, University or Technical School: _____ Major: _____

WORK EXPERIENCE

Current or Most Recent Position	Dates of Employment	
	From (Mo./Yr.)	To (Mo./Yr.)
Employer	Phone Number	
Address	Supervisor	
Description of duties, responsibilities and equipment operated		

Previous Position	Dates of Employment	
	From (Mo./Yr.)	To (Mo./Yr.)
Employer	Phone Number	
Address	Supervisor	
Description of duties, responsibilities and equipment operated		

REFERENCES

Please provide two (2) personal references (other than family):

Name	Phone Number	Relationship
1		
2		

The university is required to verify identity and work authorization at the time of employment.

CERTIFICATION AND STATEMENT OF UNDERSTANDING

I certify that all of the information furnished in the employment application and its addenda are true and complete to the best of my knowledge. I understand that the university may investigate the information I have furnished. I authorize any person, firm, or organization to supply any information about me concerning any past employment, military duties, convictions, or personal information to The Ohio State University and I further release any person, firm, or organization from any responsibility in disclosing such information, including from all liability for any damage that may result from furnishing such information to the university.

I authorize the university to obtain information regarding my record with the Bureau of Motor Vehicles if the position for which I am applying requires driving. I realize that any misrepresentation or false information included in the application materials or provided in the interview process can lead to the withdrawal of an offer of employment or to termination from employment. I understand the any future offer of employment may be conditioned upon the results of examinations, physical or others, as may be necessarily required by the university. The University will pay the reasonable cost of any examination which may be required.

The Ohio State University is a drug-free workplace. **Individuals offered employment at The Ohio State University may be required to successfully complete a pre-employment physical which includes drug testing.** Individuals who refuse to take or fail the drug test, after being informed, will be removed from employment consideration.

Signature: _____ Date: _____