



BUSINESS OFFICE  
 5000 DEER PARK DRIVE SE, SALEM, OREGON 97317-9392  
 503.581.8600 | 503.585.4316 fax

# Instructional Personnel Application

## Personal Information

Today's Date \_\_\_\_\_

Date Available \_\_\_\_\_

Social Security Number \_\_\_\_\_

Name \_\_\_\_\_

If you have used another name, please indicate: \_\_\_\_\_ E-mail Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  Please do not call at work.

### NONDISCRIMINATION POLICY

It is the policy of Corban University to provide equal opportunity to all applicants, employees, and students. It is also the policy of the University not to discriminate on the basis of sex, disability, race, color, national origin, or age in admission, and access to, or treatment in employment, educational programs or activities.

The University will afford reasonable accommodations to qualified applicants and employees with a known disability, if necessary, as long as the employee can perform the essential functions of the job, with or without accommodation and the accommodation does not cause undue hardship.

(Do not write in this space)

Ref \_\_\_\_\_

Ref \_\_\_\_\_

Criminal History Check \_\_\_\_\_

Reg. No. \_\_\_\_\_

## Position Sought

List areas which you are qualified to teach and mark with an asterisk\* those you prefer to teach: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you consider part-time work? \_\_\_\_\_

## Spiritual Information

What church are you attending now? \_\_\_\_\_

Church address \_\_\_\_\_

Are you a member? \_\_\_\_\_ Pastor's name \_\_\_\_\_

Please add a separate page with a brief testimony including your current relationship with Jesus Christ.

Have you read and do you agree with the University's Statement of Faith? *(Explain any differences on separate page.)* \_\_\_\_\_

## Education

College or University	Location	Degree granted	Date degree granted

Number of credits earned after your last degree \_\_\_\_\_

**Contracted Teaching Experience** (This section must be completed in full. Use additional paper if necessary.)

Dates (Mo./ Yr.)		Name and address of the Institution	Subject	Full time	Half time	Less than half	Name of Supervisor - include phone # (Possibly to be contacted as reference)
From	To						
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reason for Leaving:
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reason for Leaving:
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reason for Leaving:
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reason for Leaving:

**Experience Other Than Contracted Teaching** (Include U.S. Military Service. Use additional paper if necessary.)

Dates (Mo./ Yr.)		Name and address of employer	Position	Name of Supervisor - include phone # (Possibly to be contacted as reference)
From	To			

**Other References Familiar With Your Teaching Ability** (At least three people.)

Name	Address	Phone

**Criminal History Check**

Have you ever been convicted or subject to adjudication for conduct involving a felony, a misdemeanor, an assaultive crime, drug crime, or theft, or been subject to a restraining order?  Yes  No If so, when, where, which court, and what was the deposition?

**Please attach three letters of reference and a copy of your transcripts.**

**Signature/Authorization/Agreement** (Please read carefully.)

I hereby certify that this application contains no misrepresentation or falsifications and that the information given is true and complete to the best of my knowledge and belief. I understand that misrepresentation or omission of facts called for in this application is cause for cancellation of the application and/or dismissal from any employment offered by Corban University.

As part of my application for employment, I hereby consent to and authorize the release of any and all information including criminal history checks to Corban University, which may be considered in evaluating my qualifications for employment. I therefore release all parties and persons connected with any request for information from all claims liability and/or damages for whatever reasons arising out of furnishing such information.

Signature \_\_\_\_\_ Date \_\_\_\_\_