

AUBURN UNIVERSITY POSITION APPLICATION FORM

(PLEASE PRINT)

DATE _____

LAST NAME	FIRST	MIDDLE I.	SOCIAL SECURITY NO.	PHONE NO.
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POSITION APPLYING FOR: POSITION TITLE	DEPARTMENT	POSITION LOG NO.
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HOW THIS REQUEST WAS SUBMITTED: <input type="checkbox"/> IN PERSON <input type="checkbox"/> BY MAIL <input type="checkbox"/> BY TELEPHONE	FOR HR USE: MEETS MINIMUM QUALIFICATIONS: <input type="checkbox"/> YES <input type="checkbox"/> NO
APPLICANT DATA FORM ON FILE: <input type="checkbox"/> YES <input type="checkbox"/> NO; IT IS ATTACHED	REVIEWED BY: _____
COMPLETED BY: _____ (SIGNATURE)	DATE: _____

INSTRUCTIONS: THIS FORM IS USED TO MAKE FORMAL APPLICATION FOR A SPECIFIC POSITION CURRENTLY ON OUR VACANCY LIST. THIS FORM MUST BE RECEIVED BY AU HUMAN RESOURCES TO BE CONSIDERED FOR A SPECIFIC POSITION. TO COMPLETE THIS APPLICATION PROCESS, AN INDIVIDUAL MUST ATTACH AN APPLICANT DATA FORM OR HAVE AN ACTIVE APPLICANT DATA FORM ON FILE WITH AU HUMAN RESOURCES. THE APPLICANT DATA FORM REMAINS ACTIVE FOR 6 MONTHS FROM THE DATE IT IS RECEIVED. DURING THIS TIME, APPLICANTS MUST NOTIFY AU HUMAN RESOURCES OF ANY POSITIONS FOR WHICH THEY WISH TO BE CONSIDERED BY COMPLETING A POSITION APPLICATION FORM FOR EACH POSITION.

AUBURN UNIVERSITY IS AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER. IT IS OUR POLICY TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITIES, INCLUDING PROVISIONS FOR TRAINING FOR INDIVIDUAL ADVANCEMENT, FOR ALL INDIVIDUALS WITHOUT REGARD TO RACE, SEX, AGE, RELIGION, COLOR, NATIONAL ORIGIN, DISABILITY, OR VETERAN STATUS.