APPLICANT WORKSHEET - FORM B

Department	Type of Appointment: Full Time Part Time	Person Recommended
College/School		Race Gender
	12 mo 9 mo Temp	
Position No.	Tenure: Yes No	Dean's Signature
Position Title		

Please complete columns A-C with the foll	owing codes:] =				
 Column A - Type of Applicant New = Not employed by AU. Promotion or Reclassification = Employed 	yed by AU at a lower level.		Cotal No. o			EEO U s _ _ _
3. Transfer = Employed at AU, same level			GENE	ER		
Column B - Gender M = Male	F = Female			Total	W	В
Column C - Action		N	Iales			
 Recommended for hire. Interviewed. 	5. Incomplete application.6. Withdrew.	F	'emales			
3 Not as qualified as those interviewed	7 Application pending in another search					

4. Did not meet minimum qualifications

AA/EEO Use Only Total No. of Applicants Total No. of Cards Received								
GEND		ETHNICITY						
	Total	W	Н					
Males								
Females								

TO BE COMPLETED BY THE DEPARTMENT						TO BE COMPLETED BY AA/EEO		
Name Last, First, MI	Date Application Received	Date Form C Card Sent	Years of Related Experience	A Type of Application	B Gender	C Action	D Ethnicity/Race	Recruiting Source

TO BE COMPLETED BY THE DEPARTMENT							TO BE COMPLETED BY AA/EEO	
Name Last, First, MI	Date Application Received	Date Form C Card Sent	Years of Related Experience	A Type of Application	B Gender	C Action	D Ethnicity/Race	Recruiting Source