

LIST THE POSITIONS (INCLUDING SCHOOL JOBS IF APPLICABLE) WHICH YOU HAVE HELD FOR THE PAST TEN YEARS. DO NOT LEAVE ANY PERIODS UNACCOUNTED FOR (USE ADDITIONAL SHEETS IF NECESSARY). BEGIN WITH YOUR PRESENT OR MOST RECENT POSITION AND WORK BACK. MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

NAME OF FIRM OR ORGANIZATION <hr/> STREET ADDRESS <hr/> CITY AND STATE PHONE NUMBER <hr/> NAME & TITLE OF IMMEDIATE SUPERVISOR <hr/> REASON FOR LEAVING <hr/>	FROM <hr/> MONTH YEAR <hr/>	TO <hr/> MONTH YEAR <hr/>	SALARY PER _____ STARTING \$ _____ FINAL \$ _____
TITLE: _____ JOB DUTIES: _____ <hr/> <hr/>			

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I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements made herein may void this application and any actions based on it. I understand that any offer of employment tendered me is contingent upon my agreement to abide by the rules and regulations of the Board of Regents of The Texas Woman's University. I understand that employment and compensation can be terminated, with or without cause, and with or without notice, at anytime, at the option of either the University or the employee. I authorize Texas Woman's University to contact references and former employers. In the event that I am in a position deemed by the Institution to warrant a background investigation, I authorize the Institution to conduct a police inquiry regarding any past or current charges, convictions, investigations, etc.

I understand that all offers of employment extended by the Texas Woman's University will be contingent upon my ability to provide documents which establish proof of my identity and eligibility to work in the United States.

Signature _____ Date _____

State law (Leg. House Bill 1922) with limited exceptions, allow you to be informed about information the University collects about you, to review and obtain the information on this form and to correct any information you believe is incorrect.

Disclosure of your social security number (SSN) is required as a unique number to identify you at TWU. Any further disclosure of your SSN will be governed by *The Public Information Act* (Chapter 552 of the Texas Govt. Code).