

## **College of Education**Application for Employment

All graduate student employees are required to be enrolled as full-time graduate students (9 hours).

Date of Application					Cı	Current COE Program								
When will you be able to begin work?					R#	R#								
Days a	nd Hou	ırs Ava	ilable f	or Wor	<b>k:</b> (if you d	o not know	your class sch	nedule you r	may leave this	s section blo	ank)			
	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
	From	То	From	То	From	То	From	То	From	То	From	То	From	То
AM														
PM														
Referra	al Sour	ce 🗆	Faculty											
	Employee													
		_	_ , ,	_										
Person	al Info	rmatio	n											
First Nar	ne				Middle Name				Last Name					
Address						City								
State			Zip Code				Country							
Home Phone				Work Phone				Cell/Other Phone						
Email:														
	Can you submit verification of your legal rights to work in the United States? (Proof of eligibility will be required upon employment)?						○ No							
Are you currently employed at any Texas Tech component (TTU or TTUHSC)?						(	Yes	○ No						
Are you related by blood or marriage to any member of the Board of Regents of Texas Tech?						Yes	○ No							
Are you related by blood or marriage to any employee of Texas Tech?							(	Yes	○ No					
If yes, re	lative's n	ame and	departm	ent										
Have you ever been convicted, placed on probation, or placed on deferred adjudication for any criminal charges?							Yes	○ No						
If yes, pr	ovide de	tails (Typ	e of Offe	nse/ Dat	e / Sentei	nce / Dep	oosition)							

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## **Highest Degree Completed**

Name of School		Type of School
City	State	
Course of Study		Last month and year attended
Work Experience		
Employer Name		
Address		City
State	Zip Code	Phone Number
Begin Date	End Date (Leave blank if Current Job)	
Work Performed		
Employer Name		
Address		City
State	Zip Code	Phone Number
Begin Date	End Date (Leave blank if Current Job)	
Work Performed		
Skills and Qualifications		
Summarize special skills and qua Tech College of Education	lifications acquired from employment or other ex	perience that may qualify you to work for Texas
List any additional information ye	ou would like us to consider.	

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Personal References (List name and telephone number of business/work references who are *not* related to you and who are *not* your previous supervisors. If not applicable, list school or personal references who are not related to you.)

Name	Telephone	Years Known

## Certify

I certify that I have read and agree with these statements.

Signed By

I certify that all answers to the questions in my application and the supplemental questions and the information contained in my resume and other attached documents, if any, are true, complete, and correct to the best of my knowledge. I further understand that any misstatement, falsification, or omission of information will be sufficient grounds for rejection of the application, or termination of employment.

I authorize Texas Tech to make reference checks relating to my employment and I also authorize all prior employers to provide full details concerning my past employment. I release all such parties from all liabilities from any damages which may result from furnishing such information. I understand that this application and all attachments are the property of Texas Tech.

I understand that any offer of employment tendered me is contingent upon my agreement to abide by the rules and regulations of Texas Tech.

I understand that if I am applying for any position involved in patient care or the process of billing of medical services, my name must not be found on the Texas Department of Health State / Federal Medicare and Medicaid exclusion lists. Any offer of my employment will be void if my name is found on the exclusion listing.

I understand that if I am male, I am required to sign a Certification of Registration Status for the Selective Services as a requirement for employment. I further understand that if I am a male age 18 through 25, I must show proof of registration with Selective Services at the time of hire.

I understand that any offer of employment is contingent upon my completing the Immigration and Naturalization Service Employment Eligibility Verification (Form I-9) and providing documents to verify my identity and employment eligibility as required by law. When completing the Form I-9, I will be required to attest that I am a citizen or national of the U.S., a lawful Permanent Resident or an alien authorized to work.

I understand that if I am assigned to work on a federal contract at any Texas Tech entity that contains a clause requiring the contractor to use the E-Verify program, that my eligibility for employment will be confirmed through the E-Verify system.

If I am applying for employment at Texas Tech University, I understand that if I am applying for a security sensitive position, I will be subject to a background investigation and/or drug test.

I understand that continuation of employment is at the discretion and will of the institution. This is an application for employment and no employment contract is being offered. If employed, such employment is for an indefinite period of time and the institution can change wages, benefits and conditions or may terminate the employee at any time.

Signature

Date

Please submit completed application and resume to Pam Smith, pam.smith@ttu.edu or College of Education Room 109

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