



AUGUSTA UNIVERSITY

**APPLICATION FOR TEMPORARY EMPLOYMENT
HUMAN RESOURCES DIVISION – AUGUSTA UNIVERSITY ANNEX I,
AUGUSTA, GEORGIA 30912-30400010**

NOTICE: All applicants may be subject to pre-employment physical and/or drug screening dependent upon the position and its requirements. In accordance to Board of Regents policies, which are adhered by our Human Resources Division and/or our Background Investigation Committee, there are convictions or pending charges which may disqualify your employment. If you should have a question or concern, please see an HR Representative. Augusta University is an Affirmative Action/Equal Employment Employer and does not discriminate on the basis of race, religion, color, sex, age, national origin, veteran status, sexual orientation, disability, or political affiliation.

NAME (Type or Print clearly):

Last _____ First _____ Middle _____ Maiden _____

Are you a former Augusta University employee? **CHECK ONE:** YES or NO

If yes, what was the last date of employment? _____

If yes, under what name? Last _____ First _____ Middle _____

PRESENT MAILING ADDRESS:

Street: _____ City: _____ State: _____ Zip Code: _____

PHONE: Home #: _____ Business #: _____ Other #: _____

Are you eligible to work in the United States? **CHECK ONE:** YES or NO

DEPARTMENT YOU ARE APPLYING TO WORK FOR: _____

When can you start work? _____ Contact email address _____

EDUCATIONAL HISTORY:

HIGH SCHOOL: Name of School: _____ Location: _____

Check highest school year completed: 9 10 11 12 Graduate: **YES or NO**

If no, do you have a GED? YES or NO

TECHNICAL SCHOOL OR COLLEGE/UNIVERSITY:

Name: _____ Location: _____ #yrs: _____ Degree Date: _____

GRADUATE/PROFESSIONAL:

Name: _____ Location: _____ #yrs: _____ Degree Date: _____

FIELDS OF WORK FOR WHICH YOU ARE LICENSED, REGISTERED, OR CERTIFIED:

License Number: _____ Issued: _____ Expires: _____

EMPLOYMENT HISTORY:

Present or Previous Employer (Most recent):

Name under which you are employed: _____

Dates of employment: **From:** _____ **To:** _____

Employer's Address: _____

Description of work performed: _____

Release Statement: I hereby state the information on this application and/or accompanying resume/CV is true and complete. I understand that any false, misleading representations or omissions may disqualify me for further consideration for employment and may result in immediate discharge even if discovered at a later date. I hereby authorize persons, schools and employers unless indicated otherwise named above on this application to disclose information to Augusta University relevant to making an employment decision and release them from any liability or damages for examination, criminal background investigation check, physical examination and/or drug screen, if applicable.

Print Name: _____

Signature: _____

Date: _____