



# Application For Athletic Corporation, California State University, Fresno Employment

Employment Services Provided by: California State University, Fresno, Human Resources  
 Employment & Recruitment, Joyal Administration Building, Room 164  
 5150 North Maple Avenue, M/S JA71, Fresno, CA 93740-8026

Rev.4/01

Telephone Numbers: Job Line (559) 278-2383, Fax (559) 278-4275, Employment & Recruitment (559) 278-2032  
[www.csufresno.edu/humres/](http://www.csufresno.edu/humres/)

POSITION TITLE: \_\_\_\_\_

SS # \_\_\_\_\_  
 (Social Security number is required for application processing)

SPORT OR DEPT. NAME: \_\_\_\_\_

VACANCY#: \_\_\_\_\_

NAME: \_\_\_\_\_  
 (Last) (First) (M.I.)

Previous last name(s)? If any, please list \_\_\_\_\_

Applicants will be notified only if selected for an interview.

ADDRESS: \_\_\_\_\_  
 (Number) (Street)

TELEPHONE NUMBERS:

HOME: \_\_\_\_\_ MESSAGE: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

(City) (State) (Zip)

Athletic Corporation is a computer literate organization. Managers and staff rely heavily on computers for handling daily communication and office workflow for all positions. Regardless of the type of position for which you are applying, please indicate your level of competence.		Expert	Competent	Some Experience	No Experience	Software Used
	WORD PROCESSING					
	SPREADSHEET					
	DATABASE					
	EMAIL					
	INTERNET/WEB					
	GRAPHICS					

Even though some of the following information may be supplied in an attached resume, please complete the summary below to fully facilitate processing your application.

### EDUCATION LEVEL (Check the highest level attained)

Less than high school diploma       Associate degree    Year \_\_\_\_\_ Institution \_\_\_\_\_  
 High school graduate/G.E.D.       Bachelor's degree    Year \_\_\_\_\_ Institution \_\_\_\_\_  
 Technical school diploma       Master's degree    Year \_\_\_\_\_ Institution \_\_\_\_\_  
 Some college       Doctorate      Year \_\_\_\_\_ Institution \_\_\_\_\_  
 Some graduate school       Professional degree, e.g., M.D., D.D.S., J.D.    Year \_\_\_\_\_ Institution \_\_\_\_\_

Certificates or Licenses required by position (Including CA Driver License)      Title: \_\_\_\_\_      License No.: \_\_\_\_\_      Issuing State: \_\_\_\_\_      Date Issued: \_\_\_\_\_      Date Expires: \_\_\_\_\_  
 \_\_\_\_\_      Title: \_\_\_\_\_      License No.: \_\_\_\_\_      Issuing State: \_\_\_\_\_      Date Issued: \_\_\_\_\_      Date Expires: \_\_\_\_\_

Have you ever been convicted of a criminal offense other than a minor traffic violation since your 18th birthday? (A conviction is not necessarily disqualifying. Each case will be evaluated on its own merits and its applicability to the position.)  Yes  No If yes, please attach a detailed explanation.

Have you ever left employment under unfavorable circumstances?  Yes  No If yes, please explain \_\_\_\_\_

## RELEVANT EMPLOYMENT HISTORY

All applicants must complete Sections I, II and III below in full,  
in addition to submitting other application materials if required by the vacancy announcement.

### I. Employment History (List most recent first)

### II. Responsibilities and Contacts

**A. Organization:** \_\_\_\_\_  
 Department: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Start Date: \_\_\_\_\_  
 End Date: \_\_\_\_\_  
 Total # Yr. \_\_\_\_ Mo. \_\_\_\_ Monthly Salary: \_\_\_\_\_  
 FT  Perm  Temp       PT  Perm  Temp   
 Reason for Leaving: \_\_\_\_\_

Title: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Supervisors will not be contacted until the applicant is notified of the decision to check references.  
 Contact Supervisor: \_\_\_\_\_  
 Phone Number(s): \_\_\_\_\_

**B. Organization:** \_\_\_\_\_  
 Department: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Start Date: \_\_\_\_\_  
 End Date: \_\_\_\_\_  
 Total # Yr. \_\_\_\_ Mo. \_\_\_\_ Monthly Salary: \_\_\_\_\_  
 FT  Perm  Temp       PT  Perm  Temp   
 Reason for Leaving: \_\_\_\_\_

Title: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Contact Supervisor: \_\_\_\_\_  
 Phone Number(s): \_\_\_\_\_

**C. Organization:** \_\_\_\_\_  
 Department: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Start Date: \_\_\_\_\_  
 End Date: \_\_\_\_\_  
 Total # Yr. \_\_\_\_ Mo. \_\_\_\_ Monthly Salary: \_\_\_\_\_  
 FT  Perm  Temp       PT  Perm  Temp   
 Reason for Leaving: \_\_\_\_\_

Title: \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Contact Supervisor: \_\_\_\_\_  
 Phone Number(s): \_\_\_\_\_

### III.

I affirm that all responses and statements in this application for employment are complete and true. I understand that any false statement or omission may be cause for rejection of my application or for my discharge after appointment. Fingerprinting will be required for certain position classifications. I authorize the release of reference information from individuals familiar with my educational and work background to the Athletic Corporation. I understand this information is considered confidential and the content of any reference will not be made available to me.

I ALSO UNDERSTAND THAT, IF HIRED, I MUST PROVIDE DOCUMENTATION ATTESTING TO MY IDENTITY AND LEGAL RIGHT TO WORK IN THE UNITED STATES, AS REQUIRED BY THE IMMIGRATION REFORM AND CONTROL ACT OF 1986. If hired, I agree that my employment and compensation can be terminated at will, without cause, and with or without notice, at any time, either at my option or at the option of the Athletic Corporation. I understand that no employee or representative of the Athletic Corporation has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ Note: Offers of staff employment are contingent upon willingness to sign the Loyalty Oath.



# APPLICANT FLOW INFORMATION

Dear Applicant:

The Athletic Corporation, California State University, Fresno is an Equal Opportunity/Title IX employer and is required by the U.S. Department of Health, Education and Welfare to compile information concerning the ethnic background and gender of all applicants for employment. Your cooperation in completing and returning this confidential supplement to your application is respectfully requested.

You are at liberty to either provide or not provide the information requested below. However, you may be assured that all information will be used for statistical and analytical purposes only. None of the information provided will either enhance or detract from your opportunity for employment with the University, nor will it become a part of any personnel file or be made available to persons making employment decisions. Thank you.

Today's Date: \_\_\_\_\_

1. Please identify the vacancy for which you are applying. Vacancy Announcement No. \_\_\_\_\_

A. Position Title: \_\_\_\_\_

Department: \_\_\_\_\_

2. Indicate by checking the appropriate box how you learned of vacancy:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Athletic Corp. vacancy announcement | <input type="checkbox"/> Current Employee  | <input type="checkbox"/> Jobline             |
| <input type="checkbox"/> Newspaper advertisement             | <input type="checkbox"/> Former Employee   | <input type="checkbox"/> University Web site |
| <input type="checkbox"/> Employment Development Department   | <input type="checkbox"/> Relative / Friend | <input type="checkbox"/> Executive Search    |
| <input type="checkbox"/> Professional Conference             | <input type="checkbox"/> Journal           |  |
| <input type="checkbox"/> Other _____                         |  |  |

3. Gender:  Male  Female      4. Age: 18 years or older  Yes  No  
40 years or older  Yes  No

5. Veteran Status:  Veteran of the Vietnam-era  Special Disabled Veteran  Other Eligible\*  
 None

\*A veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge was authorized.

6. Ethnic Group:  American Indian / Alaskan Native  
 Asian / Pacific Islander / Filipino  
 Black / African-American  
 Hispanic / Latino / Mexican-American  
 White / Caucasian

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