

Ozarks Technical Community College

Human Resources Department
1001 E. Chestnut Expressway, Springfield MO 65802

APPLICATION FOR EMPLOYMENT

Ozarks Technical Community College prohibits discrimination and harassment and provides equal opportunities in its admissions, educational programs, activities, and employment regardless of race, color, religion, gender national origin, age, marital status, sexual orientation, political affiliation, veteran status, and disabilities that include HIV and AIDS, and medical conditions. Bona fide occupational qualifications will be allowed in those instances where age, gender, or physical requirements apply to the appropriate and efficient administration of the position. Visit www.otc.edu/security to review the Annual Security Report (Clery Report).

INSTRUCTIONS: *You must respond to every question on this application. DO NOT refer to another document such as a resume. You must fill out a separate application for each position for which you are applying.*

Area in which you are applying: Full-time Faculty Part-time/Adjunct Faculty Full-time Staff/Administration Part-time Staff/Administration

For Instructors (select all areas of interest):

Class Type:	Seated	Hybrid	Online
OTC Location:	Springfield	Richwood Valley (Ozark/Nixa)	Table Rock (Hollister)
	Lebanon	Waynesville	

Position for which you are applying: _____

Please list the discipline(s) you are qualified to teach:

How did you hear about this vacancy? _____ If you chose "other" please explain:

Full Name _____

Address _____
Street, City, State, Zip Code

Preferred Phone _____ Other Phone _____

E-Mail Address _____

Are you authorized to work in the United States? Yes No

If hired, on what date could you begin work? _____ Annual Salary Preferred _____

Are you active member inactive member retiree of (PSRS) or (PEERS) system? Yes No

If yes, indicate which system: PSRS PEERS

Do you have relatives working for OTC? Yes No If yes, state name(s): _____

Have you ever been convicted of a felony? Yes No

If you answered yes, please explain (include offense, conviction date and state occurred):

(NOTE: No applicant will be denied employment solely on the grounds of a conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position applied for may be considered.)

EDUCATION AND TRAINING

Education Level	School/Location	Hours Earned	Major/Minor	Did you Graduate?	Diploma/Degree Earned
High School GED				Yes No	
Associate Degree				Yes No	
Bachelor's Degree				Yes No	
Master's Degree				Yes No	
Doctorate				Yes No	

Do you have any other experience, training, qualifications, or skills that make you especially suited for employment at OTC? If so, please list below:

Do you have any professional licenses or certifications? If so, please list below:

EMPLOYMENT HISTORY

List previous employers, starting with your present or most recent position:

1.

Name of Employer:	Location (city & state):
Name of Supervisor:	Supervisor's Phone:
Dates of Employment:	Job Title:
Rate of Pay:	Reason for Leaving:
Duties:	

2.

Name of Employer:	Location (city & state):
Name of Supervisor:	Supervisor's Phone:
Dates of Employment:	Job Title:
Rate of Pay:	Reason for Leaving:
Duties:	

3.

Name of Employer:	Location (city & state):
Name of Supervisor:	Supervisor's Phone:
Dates of Employment:	Job Title:
Rate of Pay:	Reason for Leaving:
Duties:	

List three work references:

1. _____
Name Title
E-mail Address Telephone Number

2. _____
Name Title
E-mail Address Telephone Number

3. _____
Name Title
E-mail Address Telephone Number

Do you object to your present employer being contacted? Yes No

AUTHORIZATION FOR RELEASE OF INFORMATION: Failure to sign this application will cease the processing and consideration for employment.

I hereby certify that all statements made on this application and attachments thereto are true and correct to the best of my knowledge and, if employed, I understand that any false information in this application and attachment(s) may result in dismissal or rescinding of job offer. I authorize Ozarks Technical Community College to investigate all statements made by me on this application and/or attachments, including, but not limited to, confirmation of military service, education, previous employment, and references. I expressly authorize (and request of) any and all persons or firms named herein and contacted by Ozarks Technical Community College to disclose fully all information available to such persons which may bear upon consideration by Ozarks Technical Community College of this employment application. A copy of this signed consent may be relied upon by any person so contacted by Ozarks Technical Community College. I hereby consent to any lawful medical, drug and/or alcohol testing which may be requested or required by Ozarks Technical Community College. If accommodation for a disability will be necessary in order for me to complete the application process for the position for which I am applying, I will make such accommodation request in advance to the Human Resources Office. If I am employed, I agree to comply with all policies, regulations, and rules of Ozarks Technical Community College and applicable local, state, and federal law as currently existing or as may be modified in the future as they apply to my employment, and I specifically consent to the release of employment data including information in this application or contained in my personnel file for purposes of my participation in any employee benefit plans administered by or through Ozarks Technical Community College.

Applicant's Signature
My typed name above shall have the same force and effect as my written signature

Date

Please email the completed application and all other required documents to jobs@otc.edu

Thank you