



APPLICATION FOR EMPLOYMENT

EQUAL EMPLOYMENT OPPORTUNITY: Luna Community College (LCC) is an equal employment opportunity / affirmative action employer. All applicants will receive consideration for employment regardless of race, color, religion, gender, age, marital status, national origin, citizenship status, disability, or veteran status.

ESSENTIAL INFORMATION: All portions of this application that are applicable to you **must be completed**. Please do not indicate, "refer to resume". A completed application package includes the following: **1) Completed** Application Form (*Applicants Are Required to Provide Official Documentation Confirming Education*) **2) Letter of Interest** and **3) Current Resume**.

PERSONAL INFORMATION

Last Name	First Name	Middle Initial	Social Security Number	
Current Address:	Street	City	State	Zip Code
Phone Number:		Alternate Phone Number<		

Position Applying For _____

Are you seeking: _____ Full Time Employment _____ Part Time Employment _____ Temporary Employment

Are you currently employed: _____ Yes _____ No Date you are available to Start: _____

GENERAL INFORMATION

1. Do you have relatives working for Luna Community College? If yes, who and in what capacity. _____ Yes _____ No

2. Are you related to any member of the LCC Board of Trustees? If yes, who and in what capacity. _____ Yes _____ No

3. Are you 18 years of age or older? _____ Yes _____ No

4. If you become employed by LCC, can you furnish proof that you are eligible to work in the U.S.? _____ Yes _____ No

5. Can you perform the essential functions of the job you are applying for with or without reasonable accommodations?
_____ Yes _____ No

6. Have you ever worked for LCC? If so, provide dates of employment and position. _____ Yes _____ No

7. Do you have a valid New Mexico Driver's License? _____ Yes _____ No
(State any restrictions or conditions)



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EDUCATION: Do you have a high school diploma or equivalency? ____ **Yes** ____ **No**

List all schools attended beyond high school and their location:

Name & location of school	Major	Degree
Name & location of school	Major	Degree
Name & location of school	Major	Degree
List any courses, vocational training, licenses, certificates, or other qualifications which bear on your suitability for this position:		

COMPLETE ONLY IF APPLICABLE TO POSITION	
Typing: <input type="checkbox"/> Yes <input type="checkbox"/> No _____ WPM 10-key: <input type="checkbox"/> Yes <input type="checkbox"/> No Personal Computer <input type="checkbox"/> Yes <input type="checkbox"/> No List Specific Software Programs: _____ _____ _____	Word Processing: <input type="checkbox"/> Yes <input type="checkbox"/> No Spreadsheets: <input type="checkbox"/> Yes <input type="checkbox"/> No List Other Office Equipment and/or Software Programs which bear on you suitability for this position: _____ _____ _____

WORK EXPERIENCE — A RESUME DOES NOT SUBSTITUTE

What you write in this section is used to decide if you meet the minimum qualifications for the position announcement. Please account for all time. Include periods of unemployment, volunteer positions (unpaid and job related experience), internships, military service and any prior employment with LCC. Please begin with your most recent job. If you have employment gaps of six months or greater, please date and sign an attached written explanation for gap.

Employer		Employer's Address & Telephone Number:
Type Of Business:		Your Job Title
From (Month/Year)	To (Month/Year):	Name of Supervisor
Beginning Salary	Ending Salary	Reason For Leaving:
	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>	
Briefly describe your job duties as they relate to the position you are applying for:		

Employer		Employer's Address & Telephone Number:
Type Of Business:		Your Job Title
From (Month/Year)	To (Month/Year):	Name of Supervisor
Beginning Salary	Ending Salary	Reason For Leaving:
	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>	
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Type Of Business:		Your Job Title
From (Month/Year)	To (Month/Year):	Name of Supervisor
Beginning Salary	Ending Salary	Reason For Leaving:
	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>	
Briefly describe your job duties as they relate to the position you are applying for:		

REFERENCES: Please provide the name, address, job title and work telephone number of **three persons** who can verify employment dates, position held, job duties, etc...

1. Name and Title	Address	Work Phone
2. Name and Title	Address	Work Phone
3. Name and Title	Address	Work Phone

Please provide the name, address, and telephone number of **two persons** who are not related to you, who can attest to your character and have knowledge of your experience and suitability for the position you are applying for:

1. Name	Address	Work Phone
2. Name	Address	Work Phone

It is important that you read the section below carefully and understand its content before you sign and initial this employment application form.

1. I acknowledge that I have been advised that LCC is an Equal Opportunity Employer and does not discriminate against persons regardless of race, color, religion, gender, age, marital status, national origin, citizenship status, disability, or veteran status.	Initial
2. I understand that LCC is not obligated to offer the position to me even after completing this application or following a job interview.	Initial



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3. I officially state that answers provided in this application and in any other form, oral or written, are true and complete to the best of my knowledge. I understand that any misstated, misleading, incomplete, or false information is grounds for rejection and destruction of this application, refusal to hire, withdrawal of an offer of employment or immediate discharge without recourse, whenever and however discovered.	_____ Initial
4. I understand that nothing in the application is intended to imply or create an employment relationship or contract for employment.	_____ Initial
5. I understand and agree that in the event I am hired, that in accordance with Federal law individuals must provide to an employer, documented proof that they are authorized to work in the United States. This proof must be provided and verified by the LCC at the time of hire or no later than three business days after the date of hire.	_____ Initial
6. I authorize Luna Community College to investigate all statements made in my application for employment, and to discuss the results with those responsible for making the hiring decision. I also authorize LCC to contact my former employers, and any listed references or other persons who can verify information. Further, I release from liability and hold harmless such employer(s) and individuals and Luna Community College from any harm arising from such reference checks.	_____ Initial
7. I have applied for employment with Luna Community College and <u>might</u> be extended a conditional offer of employment. I understand that as a condition of my being considered for employment, I agree to undergo a <u>Pre-Employment Drug and Alcohol Screening</u> . I understand that if my test results are positive, I shall not be considered further by Luna Community College.	_____ Initial

Note: Application materials *cannot* be returned and LCC cannot make copies. Please keep a copy of all materials submitted. A separate application (**or copy of an application**) is required for each position for which you want to be considered.

I have read and understand the terms and conditions of this employment application.

Applicant Name (Printed)

Applicant Signature

Date

**Thank You For Considering
Luna Community College!**

**Send Application, Letter Of Interest, Current Resume, And
Official Documentation Confirming Education To: \ f4 `i bUYXi
Luna Community College
Human Resources Department
366 Luna Drive, Las Vegas, New Mexico 87701**

**Employment Applications May Be Obtained By Calling
(505) 454-2503**