



Santa Clara University

College of Arts and Sciences Faculty Employment Application

Name _____

Date _____

Position(s) Applied for _____

Santa Clara University is an Equal Opportunity/Affirmative Action employer, committed to excellence through diversity, and, in this spirit, particularly welcomes applications from women, persons of color, and members of historically underrepresented groups. The University will provide reasonable accommodations to all qualified individuals with a disability.

Santa Clara University annually collects information about campus crimes and other reportable incidents in accordance with the federal Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act. To view the Santa Clara University report, please go to the Campus Safety Services website at www.scu.edu/cs/. The report includes the type of crime, venue, and number of occurrence.

Name: _____
Last First Middle

Please carefully read the following statements and initial that you understand and acknowledge each one:

1. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States. _____
2. I understand that, if I am employed, any false statement, misrepresentation, or omission of facts on this application or any supporting documents, regardless of when discovered to be false, may result in my immediate dismissal. _____
3. I understand that I will be required to possess a current and valid California driver's license if my job requires me to drive in the course of my work. _____
4. I authorize investigation of all statements contained in this application and any supporting documents. I authorize Santa Clara University to investigate my past and present work, character, education, military, and criminal background, and to secure any and all information, which may be pertinent to my employment qualifications from former employers, educational institutions, government agencies and/or any references I have provided, and for those parties to provide information concerning my experience. I hereby release all parties from any liability arising from such investigation. _____
5. I understand that the above conditions can only be modified or amended in writing by the President, Provost, or Assistant Vice President of Human Resources for Santa Clara University. _____

Date: _____

Signature: _____