Name	Title		Organization		
Address		City		State	Zip
Phone					
Name	 Title		Organizat	tion	
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Address ()	_	City		State	Zip
Information provided on this application will become a consideration as part of an application for employmen may not be submitted instead of this application. Copie Non-Discrimination Notice: Applicants for admission employment, are all unions or professional organizatiare hereby notified that this institution does not discrimination does not discrimination.	t are not returnables of all post-secon and employment, ons holding collect minate on the basi	le. A resume or other appropria dary college transcripts will be re students, employees, sources of tive bargaining or professional a s of race, religion, color, nationa	equired as a particular of a freferral of a agreements will origin, gendo	may be inclu art of the app pplicants for with Seward ( er, age or dis	ded with the application but slication. admission and County Community College ability in admission or
access to, or treatment or employment in, its programs with the regulations implementing Title VI, Title IX, or \$ (620) 417-1018, fax number (620) 417-1089, dennis.sar Mr. Sander has been designated by Seward County implementing Title VI, Title IX, and Section 504. Any p the institution's compliance with the regulations imple	Section 504 is directed of the conderest	cted to contact Mr Dennis M. Sa ffice located in the Hobble Acade ge to coordinate the institution ntact the Assistant Secretary for	nder, PO Box emic Building, n's efforts to	1137, 1801 N Room A116. comply with	N Kansas Ave, Liberal, KS.  h the regulations
APPLICANT CERTIFICATION AND RELEAS	SE AUTHORIZA	ATION (Please read and sign)			
I hereby certify that all information provided on or knowledge and I have not knowingly withheld any fact to contact any of my schools, former or current emplo and all persons contacted by the College to disclose fu application or my employment.	or circumstance. I yers or other refer	By signing below, I authorize the ence needed to provide applical	representation	ves of Seward on to the posi	d County Community College ition sought. I authorize any
I understand that if employed, any misrepresentation of cause for dismissal. This application does not bind mo creates any contractual obligation of any kind for eith Community College and applicable local, state and fede	e or the College fo er party. If emplo	r any specific period of employr yed, I agree to comply with all	ment and I ur policies proce	derstand tha	nt nothing in this application
I acknowledge that Seward County Community Colleg psychological, on its employees or applicants for emplo		nt to conduct background check	ks, drug scree	ns and such	other testing, including
"Under the Uniform Electronic Transactions Act wish to submit your Employment Application Form ele electronic submission shall be given the same legal effe	ctronically, check t	this box and then sign and date	nically may be below. In so	e considered doing, you a	an electronic record. If you re hereby certifying that this
Date Signature o	of Applicant				