



PIONEER PACIFIC COLLEGE

EMPLOYMENT APPLICATION

If mailed, return to:
Pioneer Pacific College
Department of Human Resources
8800 SE Sunnyside Rd., Clackamas, OR 97015
Fax (503) 659-6107

Pioneer Pacific College is an Equal Opportunity Employer and we consider applicants for all positions without regard to race, color, religion, creed, gender; national origin, age, disability, marital or veteran status, or any other legally protected status.

PLEASE PRINT

Last Name _____ First Name _____ Middle Initial _____ Today's Date _____
Address _____
City _____ State _____ Zip _____ E-mail _____
Telephone _____ Mobile _____

● Position applying for _____
● Type of employment desired: Full time Part Time Adjunct
● If required for the job, can you travel? Yes No
● Have you ever been previously employed by our institution? Yes No
● Can you submit proof of legal employment authorization and identity? Yes No
● Have you ever been convicted of a felony? Yes No
● Are you currently employed? Yes No
● May we contact your present employer? Yes No
● Date you are available to start work? _____
● How did you hear about this position? _____

EMPLOYMENT HISTORY

Please provide all employment information for your past four employers, starting with the most recent. **Complete this section even if you are attaching a resume.**

Employer _____ Position Held _____
Address _____ Telephone # _____
Immediate Supervisor and Title _____
Dates Employed: from _____ to _____ Salary _____
Job Summary _____
Reason for leaving _____

Employer _____ Position Held _____
Address _____ Telephone # _____
Immediate Supervisor and Title _____
Dates Employed: from _____ to _____ Salary _____
Job Summary _____
Reason for leaving _____

Employer _____ Position Held _____
Address _____ Telephone # _____
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Dates Employed: from _____ to _____ Salary _____
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Reason for leaving _____

Employer _____ Position Held _____
Address _____ Telephone # _____
Immediate Supervisor and Title _____
Dates Employed: from _____ to _____ Salary _____
Job Summary _____
Reason for leaving _____

EDUCATIONAL BACKGROUND

Complete this section even if you are attaching a resume.

	Name, City, State	Grade Completed/Degree Received	Did you Graduate?
High School/GED			Y / N
College/University			Y / N
Additional Training			Y / N

Are you currently enrolled in school? Yes No Expected date of completion _____

Professional Licenses _____

License No. _____ Exp. Date _____ State _____

GENERAL INFORMATION

Do you have any relatives at Pioneer Pacific College in administrative or supervisory positions? Yes No

If so, please state their name, relationship and position _____

*Relatives include husband, wife, son, daughter, father, mother, brother, sister, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother in law, father in law, aunt, niece, nephew or stepparent or stepchild.

Do you have a valid drivers license? Yes No Drivers License Number _____ State _____

Note: DMV report may be required after job offer.

OTHER SKILLS AND QUALIFICATIONS

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications _____

PERSONAL REFERENCES

List 3 references names, telephone numbers, and years known (do not include relatives or employers)

NAME	TITLE	TELEPHONE

APPLICANT ACKNOWLEDGEMENT

I hereby authorize Pioneer Pacific College to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, licenses (if applicable), and references.

I hereby release from liability Pioneer Pacific College and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that if an offer letter for employment is generated it is done so subject to the receipt of an acceptable criminal background check by Pioneer Pacific College.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

I understand that it is the policy of Pioneer Pacific College not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person’s need for a reasonable accommodation as required by the ADA.

I understand and acknowledge that, unless otherwise defined by applicable law, policy, or agreement, any employment relationship with Pioneer Pacific College is of an “at will” nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause.

I understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. My failure to submit such proof within the required time shall result in the immediate termination of employment.

I understand that, if hired, I will be required to abide by all applicable rules, policies, and regulations of Pioneer Pacific College.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant Signature

Date

License is required – Review and sign below if this box is checked

I understand that a professional license is required for my position and I agree to notify Pioneer Pacific College if my license lapses for any reason or if there are any complaints against my license filed with the applicable licensing board.

I also understand that if the applicable licensing board is able to substantiate a complaint against my license or if my license lapses for any reason that it could result in the termination of my employment.

Applicant Signature

Date