

COLUMBIA UNIVERSITY
An equal opportunity/affirmative action employer

APPLICATION FOR EMPLOYMENT Today's Date _____

DATE AVAILABLE TO START WORK: _____

NAME: _____
LAST FIRST MIDDLE

PRESENT ADDRESS (STREET, APT, CITY, STATE, ZIP CODE) **CU EMAIL ADDRESS:** _____

PRESENT PHONE/MOBILE: _____

PERMANENT ADDRESS (STREET, APT, CITY, STATE, ZIP CODE): IF DIFFERENT THAN ABOVE

PERMANENT PHONE: _____

ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? YES _____ NO _____

IF YOU ARE NOT A U.S. CITIZEN OR PERMANENT RESIDENT, WHAT IS YOUR VISA TYPE? _____

WHAT IS THE WORK AUTHORIZATION EXPIRATION DATE ON YOUR VISA? _____

ARE YOU UNDER 18 YEARS OLD? YES _____ NO _____

HAVE YOU RECEIVED A COLUMBIA PAYROLL CHECK DURING THE LAST 12 MONTHS? YES _____ NO _____

IF YES, INDICATE YOUR TITLE _____, DEPARTMENT _____,
AND DATES WORKED _____.

ARE YOU CURRENTLY EMPLOYED AT COLUMBIA UNIVERSITY? YES _____ NO _____
DEPARTMENT _____

HAVE YOU EVER WORKED AT COLUMBIA UNIVERSITY LIBRARIES or CENTER FOR TEACHING AND LEARNING?
YES _____ NO _____

IF YES, WHERE? _____ WHEN? _____

HAVE YOU BEEN A TEACHING ASSISTANT OR RESEARCH ASSISTANT? YES _____ NO _____
IF YES, WHERE? _____

ARE YOU CURRENTLY A TA OR RA?
IF YES, WHERE? _____

ARE YOU RECEIVING A STIPEND? YES _____ NO _____

ARE YOU ELIGIBLE FOR FEDERAL WORK STUDY? YES _____ NO _____

EDUCATION

ARE YOU CURRENTLY A FULL TIME MATRICULATED STUDENT THIS SEMESTER? YES _____ NO _____

ARE YOU CURRENTLY A HALF TIME MATRICULATED STUDENT THIS SEMESTER? YES _____ NO _____

CHECK OFF THE SCHOOL YOU ARE CURRENTLY ATTENDING:

- _____ COLUMBIA UNIVERSITY/COLLEGE (CU)
- _____ BARNARD COLLEGE (BC)
- _____ TEACHERS COLLEGE (TC)
- _____ UNION THEOLOGICAL SEMINARY
- _____ OTHER, PLEASE SPECIFY _____

WHAT TYPE OF DEGREE ARE YOU PURSUING? _____ UNDERGRADUATE _____ GRADUATE _____ PHD

WHAT IS YOUR MAJOR? _____
 HOW MANY CREDITS ARE YOU TAKING THIS SEMESTER? _____

WHEN DID YOU BEGIN TAKING CLASSES? _____
 WHAT IS YOUR ANTICIPATED GRADUATION DATE? _____

WHAT IS YOUR CURRENT ANTICIPATED AVAILABILITY DURING THE SEMESTER?

(PLEASE WRITE IN THE TIMES YOU ARE AVAILABLE TO WORK)

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
MORNING							
AFTERNOON							
EVENING							

EMPLOYMENT HISTORY

(BEGIN WITH THE MOST RECENT/INCLUDE EMPLOYMENT AT COLUMBIA UNIVERSITY)

DATES FROM/TO **COMPANY** **NAME OF SUPERVISOR**

ADDRESS:

PHONE: _____

YOUR TITLE AND DUTIES:

REASON FOR LEAVING:

DATES FROM/TO **COMPANY** **NAME OF SUPERVISOR**

ADDRESS:

PHONE: _____

YOUR TITLE AND DUTIES:

REASON FOR LEAVING:

PLEASE LIST ANY OTHER EXPERIENCE OR SKILLS WHICH WILL ASSIST US IN HELPING YOU GAIN EMPLOYMENT: _____

COMPUTER SKILLS

FOREIGN LANGUAGE SKILLS (INDICATE IF WORKING KNOWLEDGE OR FLUENT)

DO YOU AUTHORIZE COLUMBIA UNIVERSITY TO SECURE REFERENCES FROM YOUR:

(A) FORMER EMPLOYERS? YES _____ NO _____ (B) PRESENT EMPLOYER? YES _____ NO _____

I certify that the information I have given in this application is true and correct to the best of my knowledge. I understand that misrepresentation and/or withholding of information may be considered just cause for discharge.

APPLICANT'S SIGNATURE _____ DATE _____