



Employment Application Data Sheet

Human Resources Department
1500 College Parkway
Elko, NV 89801
(775) 753-2194
(775) 753-5428
hr@gwmail.gbcnv.edu

Position you are applying for _____ Date of Application _____

Personal Data

Name _____ Current GBC Employee? Yes No

Address _____ City, State, Zip _____

Telephone Number _____ E-mail Address _____

Have you ever worked for Great Basin College or UCCSN? No Yes If Yes, give particulars: _____

List any other names you may have gone to school or worked under: _____

Education (List from most current)

Degree/Certification _____ Major Course of Study _____ Institution _____

Degree/Certification _____ Major Course of Study _____ Institution _____

Degree/Certification _____ Major Course of Study _____ Institution _____

Degree/Certification _____ Major Course of Study _____ Institution _____

Job Data (List from most current and DO NOT WRITE "SEE RESUME" IN SPACES BELOW)

Current/Last Employer _____ Length of Service _____

Contact Information for this employer _____

Illustrative Job Title and/or Summary of duties _____

Reason for leaving this employer _____

Employer _____ Length of Service _____

Contact Information for this employer _____

Illustrative Job Title and/or Summary of duties _____

Reason for leaving this employer _____

Employer _____ Length of Service _____

Contact Information for this employer _____

Illustrative Job Title and/or Summary of duties _____

Reason for leaving this employer _____

Job Data Comments (include here any employer you do NOT wish us to contact and why): _____

References (List name and contact info for three individuals who can speak to your work-related behaviors)

1: _____

2: _____

3: _____

Applicant must complete all information requested above as well as all information listed on the GBC Employment Application Checklist or your application will be considered incomplete and you may not be given consideration for employment

Great Basin College Employment Application Checklist

Checklist of materials required to complete your application

- Employment Application Data Sheet
- Resume and cover letter
- NSHE Preemployment Certification Form (must have original signature).
- Equal Employment Opportunity Data Collection Sheet (optional)
- Transcripts from all post-secondary institutions (unofficial will be accepted for application purposes but OFFICIAL transcripts are required upon employment.)
- Oath will only need to be completed after an offer of employment has been made.

Application Process at Great Basin College

GBC considers only those applications submitted for a specific posted position. Unsolicited resumes or application materials are discarded after 30 days. We do NOT maintain an applicant database, so applicants applying to multiple jobs must submit multiple applications at the time of the job posting.

Applications are reviewed by a position search committee which is exclusively responsible for determining applicant eligibility for an open position based on posted job requirements.

Applicants are typically contacted for a telephone interview first and finalists are invited to campus for in-person interviews which occur in a group setting. In addition to a traditional interview, academic applicants will be required to give a teaching demonstration in their area of application. Administrative applicants typically appear in an open forum setting to answer questions from the general college community.

Recruitment for open positions may begin months before the position actually becomes available. Applicants are strongly encouraged to contact Human Resources at (775) 753-2194 to check on the status of their application and to ensure that all application materials have been submitted.

Forward all application materials to:

Great Basin College
Human Resources Department
1500 College Parkway
Elko, NV 89801
lynnettep@gwmail.gbcnv.edu
(775) 753-5428 fax

Great Basin College (GBC) is an Affirmative Action/Equal Opportunity educational institution. It is guided by the principle that equal opportunity means more than equal employment opportunity, and that access to facilities and services shall be available to all people regardless of their race, age, religion, color, sex, sexual orientation, disability, veteran status, or national origin. This principle is applicable to every member of the GBC/CCSN community, both students and employed personnel at every level, and to all facilities and services.

GBC employs United States citizens and persons lawfully authorized to work in the United States. All qualified individuals are encouraged to apply.

Individuals with disabilities requiring accommodation during the hiring process should notify the Human Resources Office at (775) 753-2263 by the filing deadline.

Para la traducción de, o ayuda con, cualquier material de esta solicitud, pongasé en contacto con el departamento de Recursos Humanos al (775) 753-2263

This form requires an original signature.

**UNIVERSITY AND COMMUNITY COLLEGE SYSTEM OF NEVADA
PREEMPLOYMENT CERTIFICATION**

Title 2, Chapter 5, of the Code of the Nevada System of Higher Education (NSHE) requires that all candidates interviewed for academic and administrative faculty positions execute the following certification as a condition of being considered for employment. Failure to submit a timely certification when requested may result in disqualification from employment consideration.

Certification of Credentials & Qualifications

I certify that all application materials submitted for employment consideration (e.g., letter of interest, curriculum vitae or application, educational and employment records, publications, or work samples) are a true, accurate, and complete representation of my credentials and qualifications. I understand that degrees offered in support of my candidacy must be issued by an institution accredited by a regional, national, professional, or specialized accrediting body and that degrees issued outside the U.S. must be evaluated for equivalency to U.S. degrees.

Acknowledgement of Responsibility to Obtain/Maintain Eligibility to Work in the United States

I understand the NSHE employs only individuals who are lawfully eligible to work in the United States and that employment eligibility will be verified upon employment. If I do not currently have permanent eligibility to work in the U.S., I understand that it is my responsibility to obtain and/or maintain eligibility to work and that loss of eligibility to work at any future date will invalidate my employment contract and result in concurrent separation from employment without recourse or appeal.

Certification or Disclosure Pertaining to Criminal Convictions

I understand that in selected circumstances, convictions for a misdemeanor, gross misdemeanor, or felony related to the duties and responsibilities of a given position may influence consideration for employment. I certify that unless I have attached hereto a statement about the dates, charges, and circumstances of any such convictions, I have not been convicted of a misdemeanor, gross misdemeanor, or felony in any jurisdiction inside or outside the U.S.

Disclosure of the Employment of Relatives

I understand that the NSHE prohibits the concurrent employment of relatives if one person will be the immediate supervisor or be in the direct line of authority of any relative within the 3rd degree of consanguinity or affinity, including members of the Board of Regents. *[The third degree of consanguinity or affinity is defined as spouse, mother, father, brother, sister, or child (including half, step, and in-law relationships in the same categories), first cousin, aunt, uncle, niece, nephew, grandparent, or grandchild.]* Information concerning related employees is public information subject to disclosure under the public records law. I certify that I am not related to any other person within the NSHE, within the 3rd degree of consanguinity or affinity, except as disclosed below:

Name & Title of Relative: _____

UCCSN Affiliation of Relative: _____

Relationship to Relative: _____

Authorization to Verify Application Materials

I understand that any falsification, misrepresentation, or material omission in my application materials (including this certification) or making other false or fraudulent representations in securing employment may be grounds for disqualification of my candidacy or (if discovered after the date of hire) invalidation of any employment contract, without recourse or appeal under Title 2, Chapter 6 of the UCCSN Code.

My signature below authorizes the NSHE to verify all of my application materials including educational and employment records, with the understanding that facsimiles or photocopies of this authorization shall be deemed as valid as the original.

Signature of Candidate: _____

Printed Name of Candidate: _____ ***Date:*** _____

Position Applied For: _____

Name in which degree(s) issued (if different): _____

Equal Employment Opportunity Data Collection Sheet

Completion of this form is optional and will in no way affect your application.

To help us comply with federal/state equal employment opportunity reporting requirements, we ask that applicants complete the following questions. This pre-employment form is not part of the application for employment and is maintained in a confidential file separate from the application. Data is used for statistical purposes and to measure effectiveness of recruitment efforts.

Title of Job Applied for:

Date of Application:

Please check one appropriate box in each of the following categories:

GENDER: Male Female

- RACE:**
- White** (Not of Hispanic Origin) - All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
 - Black** (Not of Hispanic Origin) - All persons having origins in any of the Black racial groups of Africa.
 - Hispanic** - All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
 - Asian or Pacific Islander** - All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example: China, India, Japan, Korea, the Philippine Islands, Samoa and Hawaii.
 - American Indian or Alaskan Native** – All persons having origins in any of the original indigenous peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

Please check any and all categories that apply to you.

SPECIAL DISABLED VETERAN

1. A veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation under laws administered by the Department of Veteran Affairs for a disability).
 - a. Rated at 30 percent or more; or
 - b. Rated at 10 or 20 percent in the case of a veteran who has been determined under section 1506 of Title 38, U.S.C., to have a serious employment handicap: or
2. A person who was discharged or released from active duty because of a service-connected disability.

VETERAN OF THE VIETNAM-ERA

1. A person who served more than 180 days of active military, naval, or air service, any part of which was during the period of August 5, 1964 through May 7, 1975; and
2. Was discharged or released with other than a dishonorable discharge, or
3. Was discharged or released from active duty because of a service-connected disability.

VETERAN, OTHER

**Nevada System of Higher Education
Great Basin College**

OATH / AFFIRMATION

This Oath/Affirmation is required by the Bylaws of Great Basin College approved by the Nevada Constitution and the Nevada System of Higher Education Board of Regents (Article 11, Section 5 and Article 15, Section 2). It is to be filed with your first Terms of Employment Contract.

State of _____

County of _____

I, _____, do solemnly swear (or affirm) that I will support,
Name of person taking oath or affirmation

protect and defend the Constitution and Government of the United States, and the Constitution and Government of the State of Nevada, against all enemies, whether domestic or foreign, and that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution or law of any state notwithstanding, and that I will well and faithfully perform all the duties of the office of _____

Position title

on which I am about to enter; (if an oath) so help me God: (if an affirmation) under the pains and penalties of perjury.

Signature of person taking oath or affirmation of office

Signed and sworn to (or affirmed) before me on _____ by _____
Date Name of person taking oath or affirmation

(ORIGINAL MUST BE NOTARIZED)

Signature of Notary

Title and rank of Notary – optional

(Seal)