

Application *for* TMU Student Employment



<p>APPLICATION INSTRUCTIONS:</p> <ol style="list-style-type: none"> 1. Please complete electronically or print clearly in blue/black ink. 2. OSE recommends applicants save their application as "Save as PDF" under the Print feature to ensure all information is saved for submission. 3. Applications must be submitted with a resume and cover letter to receive consideration for most positions. 4. Applicants may submit their application package via Handshake (preferred), or email their application, resume, and cover letter to StudentEmployment@masters.edu 	<p>For Office Use Only</p>
	<p>Date of Application: _____</p>

POSITION BEING APPLIED FOR _____

PERSONAL INFORMATION

Last Name		First Name		Middle Name	
Former / Other Last Name (e.g. maiden)			Preferred First Name (if different from above)		
Date of Birth	Student ID No. P000	Email Address	@masters.edu	TMU Mailbox No.	

Personal Email: _____

Permanent / Home Address _____ Phone No. _____

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students are not eligible for TMU Summer Employment prior to their first semester.

If yes, please list your current _____

Scheduled hours per week: _____

Graduating students are not eligible for TMU Summer Employment post-graduation.

Are you currently employed by The Master's University ?

No ____ Yes ____

Department: _____

Position Title: _____

Scheduled hours per week: _____

GENERAL INFORMATION

What are your long-term career goals?

Why do you desire to work for this department / in this position?

Where do you attend church?

If offered employment, can you provide proof of your legal right to work in the United States? (Yes/No) _____

Applicant can perform the essential functions of the job for which they are applying, either with or without reasonable accommodation. (Yes/No)

_____ If not, please describe the functions that cannot be performed: _____

List any relatives currently employed at TMUS:

Note: We reserve the right to refrain from hiring relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.

WORK EXPERIENCE

A current resume may be submitted in lieu of completing this section.

DATES OF EMPLOYMENT	JOB INFORMATION	EMPLOYER INFORMATION
From _____ / _____ MO YR To _____ / _____ MO YR	Title: _____ Summary of Duties: _____ _____ _____ Hours Per Week: _____	Organization: _____ Address: _____ City/State: _____ Phone Number: _____ Supervisor: _____ Reason For Leaving: _____
From _____ / _____ MO YR To _____ / _____ MO YR	Title: _____ Summary of Duties: _____ _____ _____ Hours Per Week: _____	Organization: _____ Address: _____ City/State: _____ Phone Number: _____ Supervisor: _____ Reason For Leaving: _____

APPLICANT NOTICE CONCERNING THE AMERICANS WITH DISABILITIES ACT

Some applicants are not aware that The Master's University interviewers cannot ask them whether they have disabilities that are protected under the Americans with Disabilities Act (the ADA) or if they may require reasonable accommodations for such disabilities. Applicants may also not realize they should give advance notice of the need for accommodations in the employment process (such as when taking tests or being interviewed). To prevent any misunderstanding or embarrassment, The Master's University wishes to advise you of the following:

If you have a protected disability (as defined by the ADA), our organization is required to provide you with reasonable accommodation for these purposes:

- a. To ensure you can apply for employment; and
- b. To enable a qualified individual with a disability to perform essential job functions.

In the employment process, reasonable accommodations, any modification or adjustment to the employment process that make it possible for you to apply for employment, in job performance, reasonable accommodations, any modification or adjustment to the job, the work environment or the way things are usually done that make it possible for a qualified person with a disability to perform the essential functions of the job.

If you believe such an accommodation is needed, please tell your interviewer, and indicate the type of accommodation you would find effective. For certain types of accommodations to permit you to apply for employment (such as providing a reader or interpreter), reasonable advance notice.

By law, we are not permitted to ask you if you need accommodation or have a protected disability.

APPLICANT STATEMENT

- x I certify that answers given herein are true and complete to the best of my knowledge and are subject to verification.
- x I authorize educational institutions, previous employers and other organizations named in this application to provide The Master's University with any information that may be required to arrive at an employment decision. I release The Master's University, its employees, officers and designees, from any and all liability resulting from any employment decision which The Master's University bases upon such information.
- x I understand that my application for employment will not be considered if it is significantly incomplete.
- x I hereby understand and acknowledge that, unless otherwise defined by law, any employment relationship with this organization is a "WILL" nature, which means that the Employee may resign at any time and the Employer may discharge Employee, make any employment alteration, including promotion, demotion, transfer, working assignment, working condition, compensation or any other employment decision, regardless of scope and/or nature, at any time with or without cause, notice.
- x I understand and agree that any material misrepresentation or any material omission of fact in my application may be justifiable cause for employment or for termination from employment. I authorize The Master's University to verify my entire work history and verify all data given in my application, related papers, or oral interviews to be true and complete.
- x I have read and agree with the school's doctrinal statement and embrace it as a practical guide for my Christian life to conform to all current and future rules and regulations of The Master's University.

SIGNATURE

My signature below certifies that:

- I commit to the provisions of the Applicant Statement and
- All information on this application is true and correct to the best of my knowledge.

Signature: _____ Date: _____

Submit this completed application, along with a resume and cover letter to StudentEmployment@masters.edu. Applicants may also submit documents by mail to T.M.U. Office of Student Employment Box #23, 21726 Placerita Canyon Road, Santa Clarita, CA 91321