

EMPLOYMENT APPLICATION

CALIFORNIA STATE UNIVERSITY, LONG BEACH RESEARCH FOUNDATION

An Equal Opportunity, Affirmative Action, Title IX Employer
6300 State University Drive, Suite 332, Long Beach, CA 90815 (562) 985-5537

We appreciate your interest in California State University, Long Beach Research Foundation (CSULB Research Foundation). The CSULB Research Foundation is an equal employment opportunity employer. Our Company's policy is to not discriminate against any applicant or employee based on race, color, ancestry, sex (including pregnancy, breastfeeding, childbirth and related medical conditions), gender, gender identity or expression, religion, national origin, age (40 and over), physical or mental disability, medical condition, genetic information, sexual orientation, marital status, military or veteran status, political affiliation, status as a victim of sexual assault, domestic violence or stalking, or any other basis protected by applicable federal, state, or local laws. The CSULB Research Foundation also prohibits harassment of applicants or employees based on any of these protected categories.

PERSONAL INFORMATION

Please complete all requested information. Separate application required for each position number.

Today's Date: _____ Date Available for Work: _____

Position Applying For: _____ Position Number: _____

Applicant Name: _____
Lastname Firstname Middle Initial

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____

Primary Email: _____ Alternate Email: _____

Are you at least 18 years old?: Yes No **Note:** Ages 18 and under still in high school will require valid work permit, if hired.

Have you ever used any other name(s)?: Yes No

If yes, please provide the other name(s): _____

Have you ever worked for or applied for a position through the Research Foundation within the last 12 months?:

Yes No

If yes, please explain when and, if employed, in what capacity: _____

Do you have any relatives or friends now employed by the CSULB University or the Research Foundation?:

Yes No

If yes, state name(s), relationship and where they are located: _____

PERMISSION TO WORK

Do you have the legal right to work in the United States? Yes No

(Note: All offers of employment are contingent upon satisfactory proof of your identity and legal right to work in the United States.)

EMPLOYMENT/VOLUNTEER WORK EXPERIENCE

List all present and past employment and/or volunteer work experience (most recent first) within the past ten (10) years. Attach additional pages if necessary. You **must** complete this section even if attaching a resume.

Date of Employment	Employer/Volunteer Information	Title and Duties
From: _____ Mo/Year To: _____ Mo/Year	_____ Company Name (Present or Most Current) _____ Street Address _____ City, State and Zip _____ Phone Number	Title: _____ Duties: _____ Reason(s) for Leaving: _____ Immediate Supervisor: _____

Date of Employment	Employer/Volunteer Information	Title and Duties
From: _____ Mo/Year To: _____ Mo/Year	_____ Company Name _____ Street Address _____ City, State and Zip _____ Phone Number	Title: _____ Duties: _____ Reason(s) for Leaving: _____ Immediate Supervisor: _____

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From: _____ Mo/Year To: _____ Mo/Year	_____ Company Name _____ Street Address _____ City, State and Zip _____ Phone Number	Title: _____ Duties: _____ Reason(s) for Leaving: _____ Immediate Supervisor: _____

EMPLOYMENT QUESTIONS

1. Have you ever been discharged from any employment? Yes No (If yes, please explain)

2. All employers including your current employer may be contacted to verify the information you provide.
May we contact your current employer prior to any offer of employment? Yes No

Please explain any gaps in your employment

JOB-RELATED SKILLS AND QUALIFICATIONS

List skills, experience, training or accomplishments relevant to the job you are applying for:

Why do you believe you are a good fit for this position?

PROFESSIONAL REFERENCES

Individuals not related to you. Business references preferred.

Name	Occupation	Phone	Address	Years known & Capacity

EDUCATION AND TRAINING

Please include name, street, city, state and zip code for each school.

School	Name and Location of School	# of Years Completed	Type of Course/ Major	Degree(s) Obtained
High School				
Junior College				
College or University				
Graduate School				
Business/ Trade or Technical School				

APPLICANT STATEMENT AND ACKNOWLEDGMENT

THIS APPLICATION IS NOT COMPLETE UNTIL IT IS FULLY COMPLETED, SIGNED AND ALL STATEMENTS BELOW HAVE BEEN READ AND INITIALED.

- _____
(initial) I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.
- _____
(initial) I recognize that this employment application is not an offer of employment. I agree that if I am hired by the CSULB Research Foundation, I will be an at-will employee, meaning that either the CSULB Research Foundation or I may end the employment relationship at any time with or without cause or notice. I understand that only the Chief Operating Officer of the CSULB Research Foundation, and no manager, supervisor or other representative of the CSULB Research Foundation, has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the at-will employment relationship, and with respect to any agreement entered into by the Chief Operating Officer, any such agreements must be in writing and signed by the Chief Operating Officer and by me or my authorized representative.
- _____
(initial) I further understand and agree that, except for my at-will employment status, if hired, my wages, hours, working conditions, job assignment(s), benefits and compensation rate(s) will be subject to change by CSULB Research Foundation.
- _____
(initial) I understand that if I am offered employment, I may be required to sign a confidentiality, non-solicitation and/or non-disclosure agreement, as a condition of the employment.
- _____
(initial) I understand that the CSULB Research Foundation may share the information contained in this application with other CSULB Research Foundation employees for employment and administrative purposes and hereby consent to such transfer.
- _____
(initial) I hereby authorize, to the extent allowed by applicable federal, state and local laws, the CSULB Research Foundation to conduct its own investigation of my references, employment history and education and, further, authorize the references and prior employers I have listed to disclose to the CSULB Research Foundation information related to my employment history and qualifications for the position for which I am applying, without giving me prior notice of such disclosure. In addition, I hereby release the CSULB Research Foundation, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
- _____
(initial) I understand and expressly agree that if employed by the CSULB Research Foundation, storage areas provided for me (locker, desk, etc.) are open to investigation by the CSULB Research Foundation without prior notice to me. In addition, there is no personal right of privacy existing for employees, regardless of position or title, when using CSULB Research Foundation owned equipment and resources (i.e. computer systems, files, voice mail, e-mail, etc.).
- _____
(initial) If hired, I hereby authorize the CSULB Research Foundation to mail my paycheck to my home address on file with HR if I do not pick-up my paycheck between the designated hours on pay day or if I elect to not participate in direct deposit.
- _____
(initial) I agree to comply with relevant medical testing if required by the job.

(Continue to next page)

APPLICANT STATEMENT AND ACKNOWLEDGMENT (Continued)

(initial)

I understand that the CSULB Research Foundation has an arbitration procedure governed by the Federal Arbitration Act, 9 U.S.C. sections 1 et seq. The arbitration procedure applies to claims brought by me against the CSULB Research Foundation or by CSULB Research Foundation against me. I agree that any claim arising out of or relating to the application process, including, without limitation, a claim alleging unlawful discrimination and/or harassment, and any claim arising out of or relating to my employment or its termination (if I am offered and accept employment), including, without limitation, a claim of unfair business practices, unlawful employment discrimination, harassment, wrongful demotion and/or wrongful termination, will be presented to a neutral arbitrator for final and binding decision in accordance with procedures adopted by CSULB Research Foundation. These procedures do not prevent me from filing a claim or charge with the Equal Employment Opportunity Commission, U.S. Department of Labor or National Labor Relations Board. Nor do these procedures prevent me from making a claim for workers compensation or state disability benefits or unemployment insurance. I understand and agree that I may review CSULB Research Foundation's arbitration procedures before submitting this application for employment by making a written request for a copy of those procedures from CSULB Research Foundation, 6300 State University Drive, Suite 332, Long Beach, CA 90815.

THIS AGREEMENT IS A WAIVER OF ALL RIGHTS TO CIVIL COURT ACTIONS FOR A CLAIM SUBJECT TO ARBITRATION. ONLY THE ARBITRATOR, NOT A JUDGE OR JURY, WILL DECIDE THE CLAIM OR DISPUTE.

My signature below certifies that I agree to be bound by the terms and conditions stated in this application, which contains all the understandings between the CSULB Research Foundation and me concerning the topics addressed herein, and supersedes any prior inconsistent understandings between the CSULB Research Foundation and me on such issues.

APPLICANT NAME

APPLICANT SIGNATURE

DATE