

# APPLICATION FOR PRESIDENT ALABAMA COMMUNITY COLLEGE SYSTEM

Date received by the Alabama Department of Postsecondary Education: (DPE USE ONLY) \_\_\_\_\_

PRESIDENTIAL VACANCY APPLIED FOR: \_\_\_\_\_

## GENERAL INFORMATION

Applicant's Name:  Ms.  Mr.  Dr.

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Applicant's Address:

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Applicant's Telephone (include Area Code):

Home: \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

Are you either a U.S. Citizen or authorized to work in the United States?

Yes:  No:

If you have ever worked or attended school under another name, please list name(s):

\_\_\_\_\_

## FAMILY RELATIONSHIP DISCLOSURE

Are you a relative of any member of the Alabama State Board of Education? Yes  No

If yes, list the name(s) of relative(s): \_\_\_\_\_

Are you a relative of any employee of the Alabama Department of Postsecondary Education or any employee of the Alabama two-year college system? Yes  No

If yes, list the name(s) of relative(s): \_\_\_\_\_

Place of employment of relative(s): \_\_\_\_\_

## CURRENT EMPLOYMENT

Current Job Title: \_\_\_\_\_

Current Employer (Company/Institution Name): \_\_\_\_\_

Address of Current Employer: \_\_\_\_\_

Name & Title of Current Supervisor: \_\_\_\_\_

Address of Current Employer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number of Current Supervisor (include Area Code): \_\_\_\_\_

Date Employed: \_\_\_\_\_

## IMMEDIATE PAST EMPLOYMENT

Job Title: \_\_\_\_\_

Employer (Company/Institution Name): \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number of Supervisor (include Area Code): \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

## SELECTIVE SERVICE REGISTRATION

*Code of Alabama (1975), sec. 36-26-15.1, provides that no person who is required to register with the Selective Service under the United States Military Selective Service Act (50 U.S.C. App.453) shall be offered employment by the State of Alabama without proof of such registration. Please complete the appropriate statement below.*

(1) I am not required to register with the Selective Service System because:  
\_\_\_\_\_

(2) I have registered with the Selective Service System, and I am enclosing, or will provide documentation of, such registration.

## AUTHORIZATION AND ACKNOWLEDGEMENTS

1. I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on the application may be grounds for dismissal.
2. I hereby authorize the Alabama Department of Postsecondary Education to investigate all statements contained in this application. I also grant permission to the Department to contact all references and authorize said references to release all information concerning my previous employment and any other pertinent information these references might have, personal or other wise, excluding any medical or health information precluded from disclosure or consideration under federal law or state law. I release all parties from all liability for any damage that may result from furnishing this information to you.
3. I understand and agree that, if selected as a finalist, I will furnish official college transcripts.
4. I understand and agree that, if selected as a finalist, a thorough background check will be conducted.
5. I understand and agree that, if selected for this position, I will furnish a health medical examination report.
6. I understand and agree that, if hired, I shall be an at-will employee of the Alabama State Board of Education subject to termination, with or without cause, upon such prior notice as is required by the policies and procedures of said Board.
7. I understand and agree that this form is intended to be used for application for a presidential vacancy as specifically stated in the published announcement for such vacancy. This application will be considered exclusively for the announced current opening and for no other position or future job opening. Consideration for a future employment opening will require submission of an additional form and other application materials during the period stated in the announcement for the opening.
8. I understand that a complete application packet consists of this completed and signed application form; a letter of interest; a comprehensive resume or curriculum vitae; a copy of my unofficial college transcripts indicating degree earned; and a list of five references with contact information.
9. I understand that an emailed, faxed, or incomplete application packet will not be accepted for consideration.

By signing below, I verify that I have read and understand all of the above statements.

APPLICANT'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Please do not staple or bind any part of this application packet. Mail or deliver to:

Chancellor  
Alabama Department of Postsecondary Education

Delivery Address: 135 South Union Street  
Montgomery, Al 36104

Mailing Address: Post Office Box 302130  
Montgomery, Al 36130-2130

Telephone (334) 293-4602

The Alabama Department of Postsecondary Education and the Alabama State Board of Education are equal opportunity employers and do not discriminate on the basis of race, color, national origin, religion, age, gender, disability, or any other basis on which it is unlawful to discriminate.