



BAINBRIDGE COLLEGE
 University System of Georgia
 2500 E. Shotwell Street, P.O. Box 990
 Bainbridge, GA 39818

FACULTY PERSONNEL APPLICATION

Name: _____ Social Security Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone Number _____ E-mail Address _____
 Are you eligible to be employed in the United States? [] Yes [] No
 Are you related to any Bainbridge College employee? [] Yes [] No
 Position desired: _____ Full-time: [] Yes [] No Part-time: [] Yes [] No

Please list at least three references with address and phone numbers:

1. Name: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 2. Name: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 3. Name: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____

COLLEGIATE AND PROFESSIONAL EDUCATION

Year	Degree	Institution	Major Field	Minor Field

COURSE WORK BEYOND LAST EARNED DEGREE

Year	Institution	Major Field	Minor Field

PRIOR TEACHING EXPERIENCE

Year	Institution	Rank	Subjects Taught

PRIOR ADMINISTRATIVE EXPERIENCE (IN EDUCATION)

Year	Institution	Position

PRIOR PROFESSIONAL WORK EXPERIENCE

Year	Organization	Position

MEMBERSHIP IN PROFESSIONAL AND HONOR SOCIETIES

Year	Name of Organization	Nature of Organization

SPECIAL RECOGNITIONS AND HONORS

Year	Awards of Organization	Basis of Selection

PUBLICATIONS AND RESEARCH

(Give complete list, use attachment if necessary)

Articles:

Year	Title	Name of Periodical

Books and Monographs:

Year	Title	Publisher and Location

Research Projects including Thesis Topic (Unpublished)

Year	Title	Auspices (Grant from Foundation)

THE HUMAN DIMENSION

What extra personal dimension(s) or assets would you bring to your position?

Signature: _____ Date: _____

Return completed application to:

Bainbridge College
2500 E. Shotwell Street, PO Box 990, Bainbridge, GA 39818

BAINBRIDGE COLLEGE IS AN EQUAL OPPORTUNITY INSTITUTION, SUBJECT TO GEORGIA'S OPEN RECORDS LAW, AA/EOE/ADA.



2500 E. Shotwell Street
PO Box 990
Bainbridge, GA 39818
<http://www.bainbridge.edu>
Phone: 229/243-5312
Fax: 229/248-2594

APPLICATION ACKNOWLEDGEMENT/ REFERENCE CHECK AUTHORIZATION

I hereby authorize Bainbridge College to investigate my background, references, employment record and other matters related to my suitability for employment. This may include a criminal background check and a check on my driving record. I also authorize my former employers or any third party to disclose to Bainbridge College all reports and other information related to my suitability for employment, personal or otherwise, without giving me prior notice of such disclosure. I hereby release Bainbridge College, former employers, and all references provided from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

- I understand that employment for a driving position is dependent upon a safe driving record.
- I understand that employment for a short term or temporary position may be terminated without cause at any time.
- I understand falsification or omission of facts is sufficient cause for dismissal if hired, regardless of the date of discovery.
- My signature below asserts that all information given in my application package is true, and acknowledges my understanding and agreement with all material and conditions as stated.

Applicant Signature

Date