

# Imperial Valley College Upward Bound Program

## Employment Application

### Academic Component:

Tutorial Centers \_\_\_\_\_ Saturday Instruction \_\_\_\_\_ Workshops \_\_\_\_\_

### Summer Components:

Summer Residential \_\_\_\_\_ Summer Bridge \_\_\_\_\_ Summer Non-Residential \_\_\_\_\_

Dear Upward Bound Applicant:

Thank you for your interest in the Upward Bound Program at Imperial Valley College. The following checklist is provided for your assistance in ensuring your application is complete. The following documents are required and must be submitted:

\_\_\_\_\_ **Resume**

\_\_\_\_\_ **Completed application**

\_\_\_\_\_ **Unofficial transcripts**

\_\_\_\_\_ **College Students: Tell us about yourself, and about your plans for the future.** One page double spaced

\_\_\_\_\_ **Instructors: Tell us about your dream course, what would it be if you could teach it during Saturday Sessions? And why? Select one or more courses:** Mathematics through Pre-Calculus, Laboratory Science, Foreign Language, Composition, Literature, Fitness for Life/Physical Education, Career, Study Skills or Computers. One page double spaced

\_\_\_\_\_ **Upward Bound Experience or Alum \_\_\_\_\_ years in program**

Please verify that your application is complete by checking each applicable item. Please sign and date the checklist and return it with your Application for Employment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Imperial Valley College

## Upward Bound Program

### Application for Employment

Position Applying for : \_\_\_\_\_ Date of Application: \_\_\_\_\_

#### PERSONAL DATA:

Last Name: _____	First Name: _____	MI: _____
Address: _____		Apt. #: _____
City: _____	State: _____	Zip Code: _____
Home Phone # (_____) _____	Cell Phone #: (_____) _____	
Social Security #: _____ - _____ - _____	Date of Birth: _____	
E-mail Address: _____		

#### EMERGENCY CONTACT:

*(Provide information of a relative or friend who does not live with you, but who may be contacted in the event of an emergency)*

Last Name: _____	First Name: _____	MI: _____
Address: _____		Apt. #: _____
City: _____	State: _____	Zip Code: _____
Home Phone # (_____) _____	Cell Phone #: (_____) _____	
Relationship: _____	Work Phone #: (_____) _____	

#### EDUCATIONAL BACKGROUND:

**Elementary/Secondary Education:** (Circle highest level of education) 1 2 3 4 5 6 7 8 9 10 11 12  
School: \_\_\_\_\_ Location: \_\_\_\_\_

**College or University**  
School: \_\_\_\_\_ Location: \_\_\_\_\_  
Dates Attended: From: \_\_\_\_\_ (mo/yr) To: \_\_\_\_\_ (mo/yr) Degree: \_\_\_\_\_ No. of Units: \_\_\_\_\_  
Major: \_\_\_\_\_

**Other** trade, technical, business, or military courses that relate to this position: \_\_\_\_\_  
\_\_\_\_\_

**Instructional Credentials:** \_\_\_\_\_ **First Aid Certificate:** \_\_\_\_\_  
Type: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Credential #: \_\_\_\_\_  
Issued By: \_\_\_\_\_ Date expires: \_\_\_\_\_ State: \_\_\_\_\_

**College Students:**  
Last Math Class Taken: \_\_\_\_\_ Grade Received: \_\_\_\_\_  
Last English Class Taken: \_\_\_\_\_ Grade Received: \_\_\_\_\_

#### TUTORIAL EXPERIENCE:

MATH:	<input type="checkbox"/> Algebra I/CPM I	<input type="checkbox"/> Geometry/CPM II	<input type="checkbox"/> Algebra II/CPM III
	<input type="checkbox"/> Math Analysis	<input type="checkbox"/> Calculus	<input type="checkbox"/> Trigonometry
ENGLISH:	<input type="checkbox"/> Language & Composition	<input type="checkbox"/> American Literature	<input type="checkbox"/> World Literature

**EMPLOYMENT HISTORY:** (List from present or most recent to past employers)

Employer: _____ Supervisor: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Dates Employed: From: _____ (mo/yr) To: _____ (mo/yr) Wages: Begin: _____ End: _____ per: _____ (hr/wk/mo) Description of duties performed: _____ Reason For Leaving: _____
Employer: _____ Supervisor: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Dates Employed: From: _____ (mo/yr) To: _____ (mo/yr) Wages: Begin: _____ End: _____ per: _____ (hr/wk/mo) Description of duties performed: _____ Reason For Leaving: _____
Employer: _____ Supervisor: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Dates Employed: From: _____ (mo/yr) To: _____ (mo/yr) Wages: Begin: _____ End: _____ per: _____ (hr/wk/mo) Description of duties performed: _____ Reason For Leaving: _____

**REFERENCES:**

Last Name: _____ First Name: _____ MI: _____ Address: _____ Apt. #: _____ City: _____ State: _____ Zip Code: _____ Home Phone # (_____) _____ Work Phone #: (_____) _____ Ext. _____ Occupation: _____
Last Name: _____ First Name: _____ MI: _____ Address: _____ Apt. #: _____ City: _____ State: _____ Zip Code: _____ Home Phone # (_____) _____ Work Phone #: (_____) _____ Ext. _____ Occupation: _____

I hereby certify that all statements on this application are true and complete to the best of my knowledge and belief.

I understand that false statements on application material, constitutes fraud in securing employment and is basis for non-retention under the California Education Code.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_