

CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
SUPPLEMENTAL
ACADEMIC EMPLOYMENT APPLICATION FORM

Name:

Position Applying for:

Date Available:

OTHER PERTINENT INFORMATION

Do you have relatives working for Cal Poly Pomona, ASI or Foundation? Yes ☐ No ☐

Name(s)

Department(s)

Relationship(s)

I understand that California State Polytechnic University, Pomona (Cal Poly Pomona) will verify the statements I have made regarding my academic background, employment history, and any criminal convictions which may be on my record. I give Cal Poly Pomona consent to conduct a criminal records check. I authorize my past employers and schools to give Cal Poly Pomona pertinent work-related information about me. I also understand that all offers of appointment are contingent upon receipt of satisfactory verification of information. I certify that the answers I have given in my application are true and correct and that I have not knowingly withheld any factors of circumstances. I understand that all answers given on my application for employment are subject to verification and should I be employed by Cal Poly Pomona, any misrepresentation or omission of the facts on this form and my employment application may be sufficient reason for dismissal.

Signature

Date