



CENTER
for RESEARCH 12 Shelton McMurphey Blvd · Eugene, Oregon 97401
to PRACTICE 541-343-3793 · Fax 541-868-0117

Date _____
 Position applied for _____ Social Security Number ____/____/____
 Name _____ Date available _____
 Address _____ Telephone _____
 _____ Email address _____

EDUCATION

<u>Years Attended</u>	<u>Institute & Address</u>	<u>Major area of specialization</u>	<u>Degree</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

WORK EXPERIENCE

We must have complete and current address and phone numbers of previous employers. Begin with the most recent experience and indicate which supervisors we may contact.

Are you authorized to work in the United States? Yes No

Employer	Immediate Supervisor and Title	May we contact for reference: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address		Phone
Job Title	From: Mo ____ Yr ____ To: Mo ____ Yr ____	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> If part-time, # of hrs/wk
Ending salary/hourly rate		
Description of job duties:		
Reason for leaving:		

Employer	Immediate Supervisor and Title	May we contact for reference: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address		Phone
Job Title	From: Mo ____ Yr ____ To: Mo ____ Yr ____	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> If part-time, # of hrs/wk
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Address		Phone
Job Title	From: Mo ____ Yr ____ To: Mo ____ Yr ____	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> If part-time, # of hrs/wk
Ending salary/hourly rate		
Description of job duties:		
Reason for leaving:		

On the back of this page, please write a paragraph describing your reasons for seeking this position and why you feel you are qualified for the job. If you have any skills, interests, or experience that are not reflected by the information given above, and would be complimentary to the position you seek, please mention them.

OTHER SKILLS & QUALIFICATIONS

List number of years experience in box to the right of each item. (Related to the position applying)

COMPUTER	yrs	RESEARCH	yrs	OTHER SKILLS	yrs	CLERICAL	yrs
Typing speed:		Data Collection:		Writing:		General Office	
10-Key speed:		Interviewing: Personal		Grant Writing		Paper Files Mgt	
Data Entry		Telephone		Report/Technical			
PC		Phone Intr. Service		Brochures, Newsletters		Budget Mgt.	
MAC		Telephone Recruitment		Editing			
Unix		Scheduling		Proofreading		Bookkeeping:	
Network		Coding:		APA Format		Accounting	
		Observation				Fullcycle	
Software:		Research Design		Public Speaking		General Ledger	
Word Processing		Programming		Presentation Skills		Accounts Receivable	
*List		Statistical Packages:				Accounts Payable	
		SPSS		Research Mgt.		Payroll	
Database: (*List)		BMDP		Admin Mgt.			
		SAS		Supervision		Reception:	
Spreadsheet: (*List)		S-plus		Recruitment		# of Incoming Lines	
		SEM software (*List)		Team Facilitation		Public Contact	
				Training			
Graphics: (*List)		Other: (*List)				Other:	
		Data Analysis:		Client Confidentiality		Babysitting	
		Quantitative		Type of Setting:			
		Qualitative		Clinical Work			

EMPLOYMENT POLICIES/RELEASE

PLEASE READ PRIOR TO COMPLETING AND SIGNING THIS APPLICATION.

1. This company is an equal employment opportunity employer and does not discriminate because of age, sex, race, color, national origin, disability, or religious preference.
2. Proof of employment eligibility for compliance with the United States Immigration Control and Reform Act of 1986 is required prior to employment.
3. I understand that, if the position applied for requires frequent driving, I must comply with certain automobile liability insurance requirements and provide proof of insurance, if hired.
4. Certain positions require a criminal records check.
5. Documentation of required credentials must be received prior to final interview.
6. I hereby authorize and request any and all of my former employers to furnish any and all information concerning my job performance. I agree to hold my former employers and their agents harmless from all liability which could relate in any way to the disclosure of private information or an assessment or opinion of my suitability for employment.
7. I have read and understand the job description dated _____. I have no physical or mental requirements or limitations which might affect my ability to perform the job.
8. I understand that misrepresentation or omission of facts herein is cause for termination, if I am hired.
9. I understand that, if hired, I will be required to:
 - 1) Sign a Confidentiality Agreement, requiring me to refrain from disclosing client or research participation information, and
 - 2) Complete required training.
10. I have read and understand this application and have answered all portions of this application truthfully and correctly, with no omissions.

(Signature)

(Date)

This application is valid for 90 days.
Attach to employment application.

APPLICANT'S CERTIFICATION & AGREEMENT

PLEASE NOTE: Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment and identity within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

1. I understand that consideration for employment is contingent on the results of a reference and employment background check. I authorize Center for Research to Practice to investigate the truthfulness of all statements made on this application and to contact my former employers, other listed references, or any other persons who can verify information. I further authorize Center for Research to Practice to discuss the results of any investigation with all of their employees who are involved in the hiring process. I further authorize all contacted persons and former employers to provide information concerning this application, my background, and suitability for employment and I release each such persons and former employers from liability for providing such information.

Exceptions

2. I understand that failure to sign this agreement nullifies my application for employment.

Signature

Date

AFFIRMATIVE ACTION QUESTIONNAIRE

Instructions:

Center for Research to Practice (CR2P) has a continuing commitment to monitoring hiring and promotion processes to detect—and deal appropriately with—any instances of real or apparent inequities with respect to age, sex, race, or ethnicity of the applicant.

To provide CR2P with the information it needs for this important task, complete the form below and attach it to your application.

The Affirmative Action Officer will separate this form from your application. This information is confidential and will be maintained in an office separate from the applications.

If you decline to provide this information, it will in no way affect your application. Your cooperation is appreciated.

Name _____ Sex: Female _____ Male _____

Birth date _____ Disabled: No _____ Yes _____

Vietnam Era Veteran: No _____ Yes _____

Race or Ethnic group (check one)

Note: The category that most closely reflects the individual's recognition in the community should be used for purposes of reporting mixed racial and/or ethnic origins.

_____ **American Indian or Alaskan Native.** A person having origins in any of the original peoples of North America, and who maintains a cultural identification through tribal affiliation or community recognition.

_____ **Asian or Pacific Islander.** A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

_____ **African-American, not of Hispanic origin.** A person having origins in any of the black racial groups of Africa.

_____ **Hispanic.** A person of Mexican, Puerto Rican, Cuban, Central or South America, Portugal, or other Spanish culture or origin, regardless of race.

_____ **White, not of Hispanic origin.** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

_____ Check here if you do not wish to provide some or all of the above information.