



**University  
of Arkansas**  
RICH MOUNTAIN

**UA Rich Mountain  
Employment Application**

(Attach to resume/vita with any other required application documents)

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(Applicant Name)

Position applying for

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(Position Title)

**UA Rich Mountain**  
**Employment Application**  
**Attach to Resume/Vita**

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_

Mailing address, if different \_\_\_\_\_

Telephone(s) \_\_\_\_\_ Email address \_\_\_\_\_

Position applying for \_\_\_\_\_

Have you ever filed an application for employment with UA Rich Mountain or RMCC? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, when and what position? \_\_\_\_\_

Have you ever been employed by UA RICH MOUNTAIN, RMCC, or other UA System school? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, list position, employment dates, and name, if different.  
 \_\_\_\_\_

Have you ever been employed by Arkansas State Government? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, provide agency, position, and employment dates.  
 \_\_\_\_\_

Have you ever been dismissed from a position? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, why?  
 \_\_\_\_\_

May we contact your current employer? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain.  
 \_\_\_\_\_

May we contact your former employers? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain.  
 \_\_\_\_\_

Can you provide proof of citizenship or authorization to work in the U.S. upon employment? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime or misdemeanor (other than a traffic violation)? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you received a copy of the Position Description for the job in which you are applying? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have the abilities to fulfill the requirements as outlined in the Position Description? Yes \_\_\_\_\_ No \_\_\_\_\_

Employment Status:  
 List professional license(s) relevant to position for which you are applying. Give type of license, license number, expiration date, and state.  
 \_\_\_\_\_  
 \_\_\_\_\_

Nepotism:  
 Do you have any relatives employed by UA Rich Mountain? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please list below.

Name:	Relation:	Position:

Complete each section of this page if your resume does not provide the requested details.  
 Work History

**Complete each section of this page if your resume does not provide the requested details.**

**Work History**

List all prior work experience, beginning with your most recent employment, including military service, even if you believe that your experience is not related to the position. You may list volunteer or unpaid work as part of your history; however, you should show the number of hours per week you performed these duties. Use a separate sheet for continuation if needed.

Position/Title _____ Supervisor's name _____ Salary \$ _____ Reason for leaving: _____	Employer _____ Email _____ Name under which employed, if different. _____	Employment Dates From: _____ To: _____ Full-time _____ Part-time _____ Summer _____ Other: (specify) _____ Average # of hours/week: _____
Position/Title _____ Complete mailing address _____ Supervisor's name _____ Duties (Be specific): _____ Reason for leaving: _____	Employer _____ City _____ State _____ Postal _____ Phone _____ Name under which employed _____	Employment Dates From: _____ To: _____ Summer _____ Part-time _____ (Average # of hours/week _____) Full-time _____ Volunteer _____ Other: (specify) _____ Salary: (Lowest/Highest) \$ _____ /\$ _____
Position/Title _____ Complete mailing address _____ Supervisor's name _____ Duties (Be specific): _____ Reason for leaving: _____	Employer _____ City _____ State _____ Postal _____ Phone _____ Name under which employed _____	Employment Dates From: _____ To: _____ Summer _____ Part-time _____ (Average # of hours/week _____) Full-time _____ Volunteer _____ Other: (specify) _____ Salary: (Lowest/Highest) \$ _____ /\$ _____

**Education History**

Name and location post secondary schools, vocational, &/or other institutions attended	From: Mo/Year	To: Mo/Year	Discipline or Program (Major)	Hours Completed	Degree/Diploma Awarded	Date Graduated
	/	/				
	/	/				
	/	/				

High school information	Received: Diploma _____, G.E.D. _____, Certificate, type awarded: _____	If none, highest grade completed: _____
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**Professional References**

Name	Title	Company Name	Phone Number(s)	Email Address

**STATE OF ARKANSAS**  
**Department of Finance and Administration**  
**EMPLOYEE DISCLOSURE/CERTIFICATION AND EMPLOYMENT OF FAMILY MEMBERS FORM**

**DISCLOSURE REQUIREMENTS**

Governor's Executive Order 98-04, Governor's Policy Directive #8, and ACA §21-8-304 require that the following information be disclosed to be considered for employment with the State of Arkansas.

1. Are **you** one of the following:  
 current member of the AR General Assembly?                       former member of the AR General Assembly?  
 current constitutional officer?     former constitutional officer?  
 current state employee?     former state employee?
  
2. Are any of your relatives one of the following: (Relative is defined as husband, wife, mother, father, stepmother, stepfather, mother-in-law, father-in-law, brother, sister, stepbrother, stepsister, half-brother, half-sister, brother-in-law, sister-in-law, daughter, son, stepdaughter, stepson, daughter-in-law, son-in-law, uncle, aunt, first cousin, nephew, or niece)  
 current member of the AR General Assembly?                       former member of the AR General Assembly?  
 current constitutional officer?     former constitutional officer?  
 current state employee?     former state employee?
  
3.  None of the above applies.
  
4. Certain family or business relationships may prohibit an agency from hiring you. If any block is checked in #1 or #2 above, you will be required to disclose additional information if you are selected for interview to determine whether your employment would be prohibited or would require approval. I understand, should I become an employee of the State of Arkansas, that I may be reprimanded or terminated for failing to disclose the required information or disclosing incorrect information.

I understand that, should I become an employee of the State of Arkansas, I will be required to disclose any benefit obtained from a state contract by a business in which I have a financial interest, pursuant to ACA §19-11-706, and will be subject to civil, criminal, and/or administrative remedies if I fail to report such benefits.

I understand that, should I become an employee of the State of Arkansas, I will be restricted both during and after state employment from certain activities concerning procurement and selling to the state, pursuant to ACA §19-11-709, and will be subject to civil, criminal, and/or administrative remedies if I violate any of these restrictions.

I also understand that as an employee of the State of Arkansas I am restricted from supervising or being supervised by a relative. If I am hired and it can be proven that I falsely disclosed information in gaining employment that I could be subject to criminal or civil penalties under ACA § 25-16-1004 or § 25-16-1005.

Applicant/Employee Name: \_\_\_\_\_  
(Please Print)

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

Applicant/Employee Signature \_\_\_\_\_

- Before employment – applicants must be able to comply with Federal Identification (I-9) requirements.
- To be given employment consideration (application requirements), each applicant must submit a complete application and resume:
  1. Include the position title for which he or she is making application.
  2. Must sign and date the application.
  3. If applying for a position that requires a high school diploma or equivalent or a degree, must submit unofficial transcripts. Official transcripts are due before employment.
  4. Provide four references who can attest to your qualifications and abilities for effective position responsibility and performance.
  5. Include other application requirements as stated on our website for the position that highlight other information pertinent to the position responsibilities and understanding of the applicant’s abilities.
- Any employment application received after 4:30 p.m. on the advertised application review date for a particular position vacancy, even if postmarked on the closing date, will not be referred for initial employment consideration.
- The applicant should provide correct telephone numbers and addresses where he or she can be contacted; and, should either change, the applicant should notify the College.
- Applications may be deleted from further consideration for this position if any of the following occur:
  1. The applicant fails to submit full application material.
  2. The applicant does not meet the minimum qualifications established for the position.
  3. The College is unable to contact the applicant after a reasonable amount of effort at the phone numbers or addresses provided by the applicant.
  4. The applicant declines an appointment for the position for which he/she has made application &/or states that he/she no longer desires consideration.
  5. The applicant fails to appear for a scheduled interview.
- It is the policy of the College and the State of Arkansas to maintain a drug-free workplace. The unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance in the State’s workplace is prohibited. Any individual hired as an employee of the College and who violates the Drug-free Workplace policy is subject to discipline up to and including termination.
- It is the policy of the College that employees file timely and properly all tax returns in keeping with the requirements of applicable laws, regulations, and ordinances and pay timely any valid taxes owed. To be eligible for hire, an individual may be required to provide an Acknowledgement of Receipt of the Tax Obligation Policy.

Before you sign this application, review your application package to assure that you have completed all application requirements completely and accurately.

I, the below signed individual, hereby declare that, to the best of my knowledge and my ability, the information on this application form, my resume/vita, and other submitted application material is true and factual.

I understand that if I am hired my employment is not for any definite period of time, and I may be terminated at any time.

I understand if I state that I have a college degree and do not have one, my application will be rejected or, if hired, I will be terminated in accordance with Arkansas Code 21-12-102.

I understand that my application may be subject to disclosure as a public record under the Arkansas Freedom of Information Act.

I understand that certain jobs may require an acceptable driver’s safety record, and that if my current or future driver’s record is unacceptable under the State Driver’s Risk Program, my application may be rejected and, if hired, I may be subject to termination.

I understand that I will be required to provide proof of eligibility to work in the United States pursuant to the Immigration Reform and Control Act of 1986 as a condition of any employment.

I understand that false, misleading, or incomplete statements could lead to my rejection as an applicant or dismissal as an employee.

I authorize UA RICH MOUNTAIN to investigate any information in this application for employment, to contact my former employers, and to also conduct a background check and drug test/screening on me. The College reserves the right to complete these processes on applicants as prescribed by law.

I affirm that it is my genuine intent to seek and to accept, if offered, employment at UA Rich Mountain; and, because I want to work at UA RICH MOUNTAIN, this application is submitted solely for that purpose and for no other purposes.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date of Signature

Return this employment application and other application materials to:

Amy Ludwig, Director of Budget Analysis and HR  
1100 College Drive  
Mena, AR 71953

Phone: 479.394.7622, extension 1530  
Fax: 479.394.2828  
email: aludwig@uarichmountain.edu

Effective October 2018

## Applicant Affirmative Action Program Self Identification Form

### Required Information

Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Position(s) for which you are applying: \_\_\_\_\_

### Voluntary Information

NEMA is a government contractor and to comply with the regulations for equal employment opportunity and affirmative action (EEO/AA), we must track our applicants by gender and race/ethnicity and the position they applied for to the government. We are an organization that values diversity and encourages women and minorities to apply. For this reason, we invite you to indicate your gender and race/ethnicity below. This information is kept separate from your application.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. Responses will remain confidential within the Human Resources Department; and will be used only for the necessary information to include in our Affirmative Action Program and reporting requirements to the government. When reported, data will not identify any specific individuals.

**Gender:**       Male                       Female

**Definitions of race/ethnicity are on the next page (as defined by the Equal Employment Opportunity Commission).**

### Race/Ethnic Identification (check one):

Are you Hispanic or Latino?  Yes                       No

**If you answered “Yes” you have completed this form. If you answered “No” please select a race from the options below.**

- |  |   |
|--|---|
| <input type="checkbox"/> White (Not Hispanic or Latino)  | <input type="checkbox"/> American Indian or Alaska Native<br>(Not Hispanic or Latino) |
| <input type="checkbox"/> Black or African American (Not<br>Hispanic or Latino)                 | <input type="checkbox"/> Two or More Races (Not Hispanic or<br>Latino)                |
| <input type="checkbox"/> Native Hawaiian or Other Pacific<br>Islander (Not Hispanic or Latino) | <input type="checkbox"/> I do not wish to disclose.                                   |
| <input type="checkbox"/> Asian (Not Hispanic or Latino)  |   |

### **Definitions of race/ethnic categories**

**Hispanic of Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

**White (Not Hispanic or Latino)** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Black or African American (Not Hispanic or Latino)** - A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**Asian (Not Hispanic or Latino)** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**American Indian or Alaska Native (Not Hispanic or Latino)** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

**Two or More Races (Not Hispanic or Latino)** - All persons who identify with more than one of the above five races.