

PLEASE PRINT			Today's date:		
First Name	M.I.	Last Name	Pref	Ferred Name/Nickname	
Street Address	Apartment #	City	State	Zip Code	
Home Phone	Alt	ternate/Work Phone	E-Mail A	address	
		ISE OR PROVIDE THE A		ATION	
•	out the position? Adember of Pi Beta Phi?	Referral (Name) Yes No	Website		
Desired Pay:		A revel Per (reinirum)		d	
	tart work? (Date)	Annual Pay (minimum) _		lesired)	
Position desired:					
	OR NO TO THE FOLLO				
compliance with these lathis connection, all offer	aws, Pi Beta Phi will verif rs of employment are sub	ividuals who are authorized by the status of every indivi- opect to verification of the a ocuments as are required b	dual offered employmen applicant's identity and en	t with the organization. In mployment authorization,	
	rming the essential function	If yes, can you furnons of the job for which you	•		

Pi Beta Phi is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Pi Beta Phi complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Pi Beta Phi also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

PLEASE LIST YOUR WORK EXPERIENCE BELOW (MOST RECENT JOB FIRST)

	COMPANY NAME		YOUR POSITION and TITLE
FROM	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION
MO. YR.			
	CITY STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER
<u> </u>			
	TYPE OF BUSINESS		
TO	TELEPHONE NUMBER	TERMINATION	REASON
MO. YR.	()	VOLUNTARY	
		INVOLUNTAR	Y
	BRIEFLY DESCRIBE YOUR MAJOR DUTI	ES AND REASON(S)	FOR TERMINATION

	COMPANY NAME		YOUR POSITION and TITLE
FROM	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION
MO. YR.			
	CITY STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER
	TANK OF BUSINESS		
	TYPE OF BUSINESS		
TO	TELEPHONE NUMBER	TERMINATION	REASON
/		VOLUNTARY	
MO. YR.			
		INVOLUNTAR	
	BRIEFLY DESCRIBE YOUR <u>MAJOR DUTIES</u> AND <u>REASON(S)</u> FOR TERMINATION		

	COMPANY NAME		YOUR POSITION and TITLE
FROM	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION
MO. YR.			
	CITY STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER
	TYPE OF BUSINESS		
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/ MO. YR.	()	VOLUNTARY	
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	BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S) FOR TERMINATION		

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FROM	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION
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MO. YR.			
	CITY STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER
	TYPE OF BUSINESS		
ТО	TELEPHONE NUMBER	TERMINATION	REASON
/		VOLUNTARY	
MO. YR.			
		INVOLUNTAR	
	BRIEFLY DESCRIBE YOUR MAJOR DUT	<u>ies</u> and <u>reason(s)</u>	FOR TERMINATION
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EDUCATION:

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			
COLLEGE OR GRADUATE			
OTHER			

PROFESSIONAL DESIGNATIONS:

DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED
DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED

PROFESSIONAL LICENSES:

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER

REFERENCES: Please list three professional references

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to Pi Beta Phi for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the organization to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Pi Beta Phi's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the organization in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the organization and me, and that in the event I am hired, my employment will be "at will" and either Pi Beta Phi or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any employee guideline, handbook, manual, policy and the like, distributed by Pi Beta Phi to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the organization's part. Pi Beta Phi may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

References: I hereby authorize Pi Beta Phi and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquiries connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize Pi Beta Phi and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.		
SIGNED:	DATE:	

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