



### 4. Experience

**Current or Most Recent Position:** \_\_\_\_\_  
 \_\_\_ Full-time \_\_\_ Part-time \_\_\_ Temporary      **DATES OF EMPLOYMENT:** From (Mo./Yr.): \_\_\_\_\_ To (Mo./Yr.): \_\_\_\_\_  
 Description of duties, responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Place of Employment: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Department: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Final Salary: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
 May we contact this employer? \_\_\_ Yes \_\_\_ No

**Current or Most Recent Position:** \_\_\_\_\_  
 \_\_\_ Full-time \_\_\_ Part-time \_\_\_ Temporary      **DATES OF EMPLOYMENT:** From (Mo./Yr.): \_\_\_\_\_ To (Mo./Yr.): \_\_\_\_\_  
 Description of duties, responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Place of Employment: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Department: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Final Salary: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
 May we contact this employer? \_\_\_ Yes \_\_\_ No

**Current or Most Recent Position:** \_\_\_\_\_  
 \_\_\_ Full-time \_\_\_ Part-time \_\_\_ Temporary      **DATES OF EMPLOYMENT:** From (Mo./Yr.): \_\_\_\_\_ To (Mo./Yr.): \_\_\_\_\_  
 Description of duties, responsibilities: \_\_\_\_\_  
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 \_\_\_\_\_  
 Place of Employment: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Department: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Final Salary: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
 May we contact this employer? \_\_\_ Yes \_\_\_ No

**Current or Most Recent Position:** \_\_\_\_\_  
 \_\_\_ Full-time \_\_\_ Part-time \_\_\_ Temporary      **DATES OF EMPLOYMENT:** From (Mo./Yr.): \_\_\_\_\_ To (Mo./Yr.): \_\_\_\_\_  
 Description of duties, responsibilities: \_\_\_\_\_  
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 \_\_\_\_\_  
 Place of Employment: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Department: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Final Salary: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
 May we contact this employer? \_\_\_ Yes \_\_\_ No



**7. How did you learn about employment opportunities with Ohio State University Extension?**

Ohio State University Extension Human Resources website: <http://extensionhr.osu.edu/jobs.html>  
Ohio State University Employment Services website: <http://jobsatosu.edu/>  
Other website: \_\_\_\_\_  
Newspaper ad: \_\_\_\_\_  
County Extension Office: \_\_\_\_\_  
Other: \_\_\_\_\_



Applications must be completed, signed, and dated to receive employment consideration. Resumes may be submitted for additional information, but not in place of the application. The university is required to verify identity and work authorization at the time of employment.

**TO BUILD A DIVERSE WORKFORCE OHIO STATE EXTENSION ENCOURAGES APPLICATIONS FROM INDIVIDUALS WITH DISABILITIES, MINORITIES, VETERANS, AND WOMEN. EEO/AA EMPLOYER. TDD# 1-800-589-8292.**

**Certification and Statement of Understanding**

I certify that all of the information furnished in this employment application and its addenda are true and complete to the best of my knowledge. I understand that the university may investigate the information I have furnished. I authorize any person, firm, or organization to supply any information about me concerning any past employment, military duties, convictions, or personal information to The Ohio State University and I further release any such person, firm, or organization from any responsibility in disclosing such information, including from all liability for any damage that may result from furnishing such information to the university.

I authorize the university to obtain information regarding my record with the Bureau of Motor Vehicles if the position for which I am applying requires driving. I realize that any misrepresentation or false information included in the application materials or provided in the interview process can lead to the withdrawal of an offer of employment or to termination from employment. I understand that any future offer of employment may be conditioned upon the results of examinations, physical or other, as may be necessarily required by the university. The university will pay the reasonable cost of any examination which may be required.

The Ohio State University is a drug-free workplace. Individuals offered employment at The Ohio State University may be required to successfully complete a pre-employment physical which includes drug testing. Individuals who refuse to take or who fail the drug test, after being informed, will be removed from employment consideration.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_