

APPLICATION FOR FACULTY ACADEMIC EMPLOYMENT

| Name: First | Middle | | Last |
|------------------------|---|--------------------------|--------|
| Present Position and C | Organization | | |
| Home Address | | | |
| E-mail address | | | |
| Home Telephone | E | Business Telephone _ | |
| | nent at Lamar University, would le same time? Yes No | | |
| | Texas State faculty, staff, or en elationship: | | No |
| DEGREES | INSTITUTIONS | DATE (Date conferred) | MAJORS |
| | | | |

Selected applicants are required to provide original transcripts from all degree granting institutions as part of your hiring credentials.

| TEACHING EXPERIENCE: | | | | |
|----------------------|------|-------|--|--|
| INSTITUTION | RANK | DATES | | |
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I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements made herein will void this application and any actions based on it. I understand that any offer of employment tendered me is contingent upon my agreement to abide by the rules and regulations of the Board of Regents of the State of Texas State University System. I authorize you to contact references and former employers.

Signature of Applicant: _____

Date: _____

C.V. is required for all faculty applications.