



Employment Application – Supplement (References)

Job Title of position for which you are applying: _____ Dept: _____

Applicant Information

Full Name:				Date:	
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		

Please list three work-related references.

Full Name:		Relationship:	
Company:		Phone:	
Address:			
Full Name:		Relationship:	
Company:		Phone:	
Address:			
Full Name:		Relationship:	
Company:		Phone:	
Address:			

Terms of Agreement

Please be sure to read the following statement carefully.

I certify that the information provided in this Supplement to my employment application for employment ("this application") is accurate and complete. I understand that this application for employment is not, and is not intended to be, a contract of employment. I authorize Rutgers, The State University of New Jersey to verify and investigate any and all information provided in this application. I also authorize my current employer, former employers, educational institutions, references, and any other persons and entities referred to in this application, to provide information to Rutgers for employment-related purposes. In addition, I release Rutgers and the work related references listed above from any liability pertaining to investigation of the information provided in this application. I understand and agree that if I have provided any inaccurate, misleading, or incomplete information in this application or during the application process, such as during interviews, my application for employment may be denied and, if I have already been hired, my employment may be terminated. The Immigration Reform and Control Act of 1986 requires Rutgers, The State University of New Jersey to certify the identity and the employment authorization of all new employees and those already employed whose employment authorization will expire. Therefore, if offered employment at Rutgers, I will present documentation to establish my true identity and authorization to work before I can be employed, and if my employment authorization is scheduled to expire, I will present documentation to update and verify my eligibility. Certain identified job titles require a medical examination after an offer of employment has been made. If I am offered such a position, the University will make arrangements for my examination. By signing below, I agree to these terms.

Signature:		Date:	
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