

EMPLOYMENT RECORD

List employer's name, position and brief description of duties in the job that you are *presently employed*

Position	Employer Name	Description of Duties	Supervisor	Dates of Employment	
				From	To
				Mo./Yr.	Mo./Yr.

List employer's name, position and brief description of duties in the job that you were *previously employed*.

Position	Employer Name	Brief Description of Duties	Supervisor	Dates of Employment	
				From	To
				Mo./Yr.	Mo./Yr.

(Attach a separate sheet and/or your current resume if necessary.)

CERTIFICATION

I certify that all of the information provided on this application is true and correct to the best of my knowledge. I also pledge on my honor that the Career Goal Statement was written solely by me in accordance with this certification statement. I acknowledge that any misrepresentation of information will nullify my application for admission, and if enrolled, will result in disciplinary action and may include dismissal from the College of Professional Studies, Division of Public Affairs or the University.

Signature

Date

The College of Professional Studies, Division of Public Affairs at Florida Gulf Coast University encourages applications from all qualified students regardless of color, race, religion, national origin, gender, disability, or marital status.