

Name	
Last 5 digits of SSN	
Position	Sergeant
Department	Campus Public Safety

Important Notice to Applicants

Our Commitment to Diversity

Diversity and inclusion are core values of The City University of New York (CUNY or The University). We believe adherence to these values creates an environment that best allows our students, faculty and staff to learn, work and succeed. As a University, we strive to respect differences, but more importantly, we seek to leverage the talents of all members of the University community in order to foster academic and administrative excellence. These values make CUNY a great place to learn and work!

Equal Opportunity and Non-Discrimination Policy

The University is committed to a policy of equal employment and equal access in its educational programs and activities. Diversity, inclusion, and an environment free from discrimination are central to the mission of the University. It is the policy of the University to recruit, employ, retain, promote, and provide benefits to employees and to admit and provide services for students without regard to race, color, creed, national origin, ethnicity, ancestry, religion, age, sex, sexual orientation, gender, gender identity, marital status, partnership status, disability, genetic information, alienage, citizenship, military or veteran status, unemployment status, pregnancy, or status as a victim of domestic violence/stalking/sex offenses, or any other legally prohibited basis in accordance with federal, state and city laws.

It is also the University's Policy to provide reasonable accommodations, when appropriate, to individuals with disabilities, individuals observing religious practices, employees who have pregnancy or child-birth related medical conditions, or employees who are victims of domestic violence/stalking/sex offenses.

All questions or concerns regarding the University's non-discrimination policy or procedure, or the application of that procedure, should be addressed to the College's Chief Diversity Officer. Inquiries or complaints concerning sex discrimination and harassment may be referred to the College's Title IX Coordinator or to the Office for Civil Rights of the United States Department of Education.

Disability Accommodation Available for Applicants

If you require an accommodation for a disability in order to participate in the selection process, please contact the College's Office of Human Resources.

Military Service

If you are claiming preference for military service, you will be required to submit an original DD 214 along with verification of your disciplinary record.

Offer of Employment

Any offer of employment is contingent upon successful completion of CUNY's employment screening process, including receipt of references that the University and/or College considers satisfactory. Offers and terms of employment will only be made in writing.

Post Offer Pre-Employment Medical Examination, Drug Screen, and Physical Fitness Assessment

For some positions, a medical examination, drug test, and/or physical fitness assessment may be required as a condition of employment. If any examination or assessment is required, it will be stated in the Position Vacancy Notice or Job Specification.

Employment Eligibility and Identity Documents Verification

Under the Immigration and Reform Control Act of 1986, CUNY is required to verify your employment eligibility and identity within three days of your reporting to work.

Reference and Background Checking

Current and former employers may be contacted for verification of any and all information stated in this application or obtained during any phase of the selection process. In order for CUNY to obtain this information, you will be asked to sign an Authorization to Release Reference Information form agreeing to hold any and all of your reference sources harmless and free of any liability for releasing information CUNY deems relevant to determining whether to employ you. Applicants who do not want their current employer to be contacted prior to receiving an offer of employment are required to make such a request and provide reasons thereof. For some positions, a criminal background check may be required as part of the employment process. Applicants for these positions will be required to complete a personal disclosure and release form before this information is obtained.

**THE CITY UNIVERSITY OF NEW YORK
APPLICATION FOR EMPLOYMENT**

College	Various	Job ID#	2049	Full Time <input checked="" type="checkbox"/>	Part-Time <input type="checkbox"/>
Position	Campus Public Safety Sergeant	If Part-Time, list hours available:	AM	PM:	
Contract Title	Campus Public Safety Sergeant				

PERSONAL INFORMATION					
Last		First		Middle:	
If known by another name, please provide:					
Address				Apartment Number	
City		State		ZIP Code	
Daytime Phone			Evening Phone		
Email:					

If you would require an accommodation to perform the essential functions of this job and you wish to inform CUNY at this time, please indicate:	

Do you have any relatives employed in the department for which you are applying?		No Relatives	Yes, I have (a) relative(s) <input type="checkbox"/>
If you have a relative, please explain below:			

Are you permitted to work in the United States?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Will you now or in the future require a visa sponsorship for employment at CUNY	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Applicant Attestation:

By my signature below, I declare and affirm that I have read and fully understand that:

Any misrepresentation or material omission of facts in this application or in any other materials I submit in support of my candidacy (including but not limited to the letter of application and resume/CV), or in any oral statements I may make during the selection process shall be sufficient cause for disciplinary action up to and including termination, in the event I am hired, or shall be sufficient cause to end further consideration of my application prior to being hired;

Present and past employers may be contacted for verification of data and reference check either prior to or after receiving an offer of employment;

An offer of employment is contingent on successful completion of the entire employment selection process, including the receipt and review of references, satisfactory to the University;

No manager or representative of CUNY has the authority to make an offer of employment or to represent a condition of employment which is in violation of the bylaws, rules, regulations, or collective bargaining agreements governing employment at CUNY;

Any representations that are contrary to these policies, even when made in writing, are unenforceable;

Under federal law, CUNY is required to verify my employment eligibility and identity within three days of my reporting to work. At that time, I must produce appropriate supporting documents.

Signature	
Date	

Minimum Qualifications Evaluation

Your answers to the questions on this page will determine whether you meet the requirements for the title(s) for which you have applied. You must meet the stated requirements for the job to move forward with this application process. If you provide information found later to be false, you will be disqualified from the recruitment; if you have already been hired, you will be terminated from your employment.

Mark an X in the appropriate box for each question.

Question	Yes	No
Have you ever been convicted of a felony anywhere, including felonies you may have committed as a youthful offender that resulted in sealed records?		
Are you a permanent CUNY Campus Peace Officer with at least two (2) years of permanent service as a Campus Peace Officer (CPO) with successful completion of probation?		
Do you have current New York State Peace Officer Status?		
Are you a resident of New York State?		
Do you possess a valid New York State Driver's License? *		
* Learner's Permits, Temporary Permits, or receipts listing an appointment for a road test are not acceptable.		
Are you fluent in English? (Must be able to speak, read, write and comprehend the English Language. English proficiency will be evaluated at the time of interview.)		

In order to qualify to take the exam, at the time of application, a candidate must have:

1. Been a CUNY Campus Peace Officer with at least two (2) years of permanent service **AND**
2. Have one of the following combinations of education and experience (choose one from the list below by marking an X in the appropriate box):

MARK AN X IN THE APPROPRIATE BOX	EDUCATION AND EXPERIENCE COMBINATION
	<ul style="list-style-type: none"> • A Baccalaureate degree from an accredited college in Criminal Justice, Police Science, or a related field
	<ul style="list-style-type: none"> • A Baccalaureate degree in ANY field, AND • One (1) additional year of permanent service as a Campus Peace Officer (for a total of three (3) years).
	<ul style="list-style-type: none"> • An Associate's degree or sixty (60) credits from an accredited college, AND • Two (2) additional years as a Campus Peace Officer (for a total of four (4) years).
	<ul style="list-style-type: none"> • Thirty (30) college credits from an accredited college, AND • four (4) additional years of as a Campus Peace Officer (for a total of six (6) years)
	<ul style="list-style-type: none"> • Thirty (30) college credits AND • Three (3) years of full time active military experience, AND • One (1) additional year of either active military service or Campus Peace Officer experience (for a total of six (6) years)
	<ul style="list-style-type: none"> • None of the above

A. EDUCATION (Please indicate highest equivalent grade of education completed):						
Doctorate	Professional Degree	Master's	Baccalaureate	Associate	Trade/Vocational School	High School/GED
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

List schools attended, beginning with most recent (university, college, business school, vocational/trade school, high school, etc.)

SCHOOL NAME						
LOCATION (street address, city, state, ZIP)						
MAJOR STUDY						
CREDITS RECEIVED (number)		DEGREE COMPLETED	YES		NO	
SCHOOL NAME						
LOCATION (street address, city, state, ZIP)						
MAJOR STUDY						
CREDITS RECEIVED (number)		DEGREE COMPLETED	YES		NO	
SCHOOL NAME						
LOCATION (street address, city, state, ZIP)						
MAJOR STUDY						
CREDITS RECEIVED (number)		DEGREE COMPLETED	YES		NO	

Schools Attended (continued):							
SCHOOL NAME							
LOCATION (street address, city, state, ZIP)							
MAJOR STUDY							
CREDITS RECEIVED (number)		DEGREE COMPLETED	YES		NO		
SCHOOL NAME							
LOCATION (street address, city, state, ZIP)							
MAJOR STUDY							
CREDITS RECEIVED (number)		DEGREE COMPLETED	YES		NO		
SCHOOL NAME							
LOCATION (street address, city, state, ZIP)							
MAJOR STUDY							
CREDITS RECEIVED (number)		DEGREE COMPLETED	YES		NO		

IF REQUIRED FOR POSITION: Provide driver's license, professional/trade license/certification <i>Attach page, if necessary</i>	
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B. Employment History:

Begin with present (or last job if currently unemployed) and work back for the last 15 years, listing all full or part-time employment. Be sure to include any current CUNY employment held. Attach additional pages, if necessary.

EMPLOYER NAME							
JOB TITLE							
ADDRESS (street address, city, state, ZIP code)							
TELEPHONE							
BRIEFLY DESCRIBE DUTIES							
NAME/TITLE OF IMMEDIATE SUPERVISOR							
SUPERVISOR'S TELEPHONE							
DATE EMPLOYED FROM			DATE EMPLOYED TO				
REASON FOR LEAVING							
FULL TIME	YES	NO	PART TIME	YES	NO	AVERAGE HOURS WORKED PER WEEK	
SALARY			GROSS ANNUAL			GROSS WEEKLY	
						HOURLY	

Employment History (continued)									
EMPLOYER NAME									
JOB TITLE									
ADDRESS (street address, city, state, ZIP code)									
TELEPHONE									
BRIEFLY DESCRIBE DUTIES									
NAME/TITLE OF IMMEDIATE SUPERVISOR									
SUPERVISOR'S TELEPHONE									
DATE EMPLOYED FROM				DATE EMPLOYED TO					
REASON FOR LEAVING									
FULL TIME	YES	NO	PART TIME	YES	NO	AVERAGE HOURS WORKED PER WEEK			
SALARY			GROSS ANNUAL			GROSS WEEKLY		HOURLY	

Employment History (continued)										
EMPLOYER NAME										
JOB TITLE										
ADDRESS (street address, city, state, ZIP code)										
TELEPHONE										
BRIEFLY DESCRIBE DUTIES										
NAME/TITLE OF IMMEDIATE SUPERVISOR										
SUPERVISOR'S TELEPHONE										
DATE EMPLOYED FROM					DATE EMPLOYED TO					
REASON FOR LEAVING										
FULL TIME	YES	NO	PART TIME	YES	NO	AVERAGE HOURS WORKED PER WEEK				
SALARY			GROSS ANNUAL				GROSS WEEKLY		HOURLY	

Employment History (continued)										
EMPLOYER NAME										
JOB TITLE										
ADDRESS (street address, city, state, ZIP code)										
TELEPHONE										
BRIEFLY DESCRIBE DUTIES										
NAME/TITLE OF IMMEDIATE SUPERVISOR										
SUPERVISOR'S TELEPHONE										
DATE EMPLOYED FROM					DATE EMPLOYED TO					
REASON FOR LEAVING										
FULL TIME	YES	NO	PART TIME	YES	NO	AVERAGE HOURS WORKED PER WEEK				
SALARY			GROSS ANNUAL				GROSS WEEKLY		HOURLY	

Employment History (continued)										
EMPLOYER NAME										
JOB TITLE										
ADDRESS (street address, city, state, ZIP code)										
TELEPHONE										
BRIEFLY DESCRIBE DUTIES										
NAME/TITLE OF IMMEDIATE SUPERVISOR										
SUPERVISOR'S TELEPHONE										
DATE EMPLOYED FROM					DATE EMPLOYED TO					
REASON FOR LEAVING										
FULL TIME	YES	NO	PART TIME	YES	NO	AVERAGE HOURS WORKED PER WEEK				
SALARY			GROSS ANNUAL				GROSS WEEKLY		HOURLY	

Employment History (continued)									
EMPLOYER NAME									
JOB TITLE									
ADDRESS (street address, city, state, ZIP code)									
TELEPHONE									
BRIEFLY DESCRIBE DUTIES									
NAME/TITLE OF IMMEDIATE SUPERVISOR									
SUPERVISOR'S TELEPHONE									
DATE EMPLOYED FROM			DATE EMPLOYED TO						
REASON FOR LEAVING									
FULL TIME	YES	NO	PART TIME	YES	NO	AVERAGE HOURS WORKED PER WEEK			
SALARY			GROSS ANNUAL			GROSS WEEKLY		HOURLY	

Employment History (continued)											
EMPLOYER NAME											
JOB TITLE											
ADDRESS (street address, city, state, ZIP code)											
TELEPHONE											
BRIEFLY DESCRIBE DUTIES											
NAME/TITLE OF IMMEDIATE SUPERVISOR											
SUPERVISOR'S TELEPHONE											
DATE EMPLOYED FROM					DATE EMPLOYED TO						
REASON FOR LEAVING											
FULL TIME	YES	NO	PART TIME	YES	NO	AVERAGE HOURS WORKED PER WEEK					
SALARY			GROSS ANNUAL				GROSS WEEKLY			HOURLY	

C. Important skills, competencies, or experience not identified above

Identify other important skills, competencies, expertise, or related experiences (such as volunteer work, competence in foreign language, etc.) that you feel should be considered in evaluating your suitability for this position. Attach additional pages, if necessary.

D. Professional References

The University may conduct a background investigation including, but not limited to, contacting the references that you provide. Please list a minimum of three persons who are not related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying.

The Authorization to Release of Information Form (Page 25) must be completed.

NAME		TITLE	
COMPANY			
ADDRESS (street address, city, state, and ZIP code)			
DAYTIME PHONE		EMAIL	

NAME		TITLE	
COMPANY			
ADDRESS (street address, city, state, and ZIP code)			
DAYTIME PHONE		EMAIL	

NAME		TITLE	
COMPANY			
ADDRESS (street address, city, state, and ZIP code)			
DAYTIME PHONE		EMAIL	

E. BACKGROUND QUESTIONS

1. Have you ever been employed by CUNY at any time in a position not reported in Section B?

YES

NO

If yes, please give name of college, job title, name and title of supervisor, dates of employment, and reason for leaving.

Attach additional pages, if necessary.

2. Have you ever left a position for any disciplinary reason?

YES

NO

If yes, please explain briefly.

Attach additional pages, if necessary.

3. Have you ever been convicted of an offense anywhere, including felonies, misdemeanors or penal law violations (not including traffic violations or convictions sealed, expunged, or set aside under federal law or state law)?

YES

NO

4. Are there any criminal charges or penal law violations (except for traffic violations) currently pending against you?

YES

NO

5. Please explain below all past convictions or currently pending charges against you (as specified in Questions 3 and 4 above).

Attach additional pages, if necessary.

Offense

Date of Conviction

Name and Location of Court

Disposition including
incarceration

Offense

Date of Conviction

Name and Location of Court

Disposition including
incarceration

Offense

Date of Conviction

Name and Location of Court

Disposition including
incarceration

Offense

Date of Conviction

Name and Location of Court

Disposition including
incarceration

Note: A conviction record will not necessarily disqualify you from the position for which you are applying. Each record will be reviewed in accordance with guidelines established by the University and in accordance with applicable law. Failure to tell the truth will, when discovered, automatically result in your elimination from consideration or your termination, if you have been selected.

Please also note that if you have a Certificate of Relief from Disabilities or a Certificate of Good Conduct in connection with one or more criminal offenses, CUNY will take it into consideration.

Applicants who have those certificates are still required to disclose and explain their criminal convictions as required by questions 3, 4 and 5

Background Questions (continued)				
6. Do you have any prior service with a New York City or New York State agency or other New York governmental entity?	YES		NO	
If yes, state the name of your former employer, job held, and years of employment.				
If yes, are you collecting a retirement benefit from a public pension system?	YES		NO	
If you are collecting a retirement benefit from a public pension system, give name of pension system.				
<u>Please note that you may be required to suspend your pension payment if you obtain employment at CUNY, depending on the circumstances.</u>				
Are you currently employed by New York City or New York State agency or other New York governmental entity or have you worked for such an entity during the current calendar year?	YES		NO	
If yes, please state the name of your employer, job held, and years of employment:				

F. How did you learn about this position? Check all that apply	
<input type="checkbox"/>	College Human Resources Office
<input type="checkbox"/>	College Website
<input type="checkbox"/>	CUNY Website (cuny.edu or cuny.jobs)
<input type="checkbox"/>	Someone I know who works at CUNY
<input type="checkbox"/>	Union Office
<input type="checkbox"/>	Search Engine (Bing, Google)
<input type="checkbox"/>	Printed Advertisement
<input type="checkbox"/>	External Job Board
<input type="checkbox"/>	Government Job Bank or Resource Agency (Veterans' Vocational Rehabilitation, Other)
<input type="checkbox"/>	Job Fair, Conference, or Convention
<input type="checkbox"/>	Professional or academic group, contact, or referral
<input type="checkbox"/>	Social Media (LinkedIn, Facebook, Academia.edu, Other)
<input type="checkbox"/>	Search Firm
<input type="checkbox"/>	Other General Category (Please explain):

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Voluntary Self-Identification Demographic Questions

The City University of New York is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. Submission of this information is voluntary, and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcements. When reported, the data will not identify any specific individual.

(Please check all that apply. If you do not wish to disclose the information, please check the appropriate box.)

Please indicate your Gender:

- ☐ Female
- ☐ Male
- ☐ I prefer not to disclose this information

Are you Hispanic?

- ☐ Yes
- ☐ No
- ☐ I prefer not to disclose this information

What is Your Race or Ethnicity?

- ☐ American Indian or Alaskan Native
- ☐ Asian
- ☐ Black or African-American
- ☐ Italian-American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Puerto Rican
- ☐ White
- ☐ I prefer not to disclose this information

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Voluntary Self-Identification of Disability

The City University of New York is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. Submission of this information is voluntary, and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcements. When reported, the data will not identify any specific individual.

Because we do business with the government, we must reach out to, hire, and provide equal opportunity to qualified people with disabilities¹. To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition. Disabilities include, but are not limited to:

- Blindness
- Deafness
- Cancer
- Diabetes
- Epilepsy
- Autism
- Cerebral Palsy
- HIV/AIDS
- Schizophrenia
- Muscular Dystrophy
- Bipolar Disorder
- Major Depression
- Multiple Sclerosis (MS)
- Missing limbs or partially missing limbs
- Post-Traumatic Stress Disorder (PTSD)
- Obsessive-compulsive Disorder
- Impairments requiring the use of a wheelchair
- Intellectual disability (previously called mental retardation)

(For the below questions, please check all that apply. If you do not wish to disclose the information, please check the appropriate box.)

Are you an individual who has a physical or any other disability?

- ☐ Yes
- ☐ No
- ☐ I prefer not to disclose this information

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

If you identify as an individual who has a physical or any other disability, do you require special working accommodations?

- ☐ Yes
- ☐ No
- ☐ I prefer not to disclose this information

¹ Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

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Voluntary Self-Identification Military Status

The City University of New York is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. Submission of this information is voluntary, and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcements. When reported, the data will not identify any specific individual.

Please check all that apply:

- ☐ **NOT a Veteran**
- ☐ **Armed Forces Service Medal Veteran:** Any veteran who, while serving on active duty in the US Military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209)
- ☐ **Disabled Veteran:** Either (1) a veteran of the US military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.
- ☐ **Other Protected Veteran:** A veteran who served on active duty in the US military, ground, naval or air service during a war or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.
- ☐ **Recently Separated Veteran:** A veteran separated during the three-year period beginning on the date of the veteran's discharge or release from active duty in the U.S. military.
- Discharge Date (mm/dd/yyyy): _____
- ☐ **I prefer not to disclose this information**

Please note: Some veterans may be eligible for additional points on the examination. Please see the Notice of Examination for more information.

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College:	Various
Name of Candidate:	
Position Sought:	Campus Public Safety Sergeant #2049

Authorization to Release Reference Information	
<p>I have applied for a position with The City University of New York (CUNY) and would like CUNY to be fully informed of my qualifications for the position. I hereby authorize any current or former employer, professional reference, and education/training provider, to disclose in good faith any information they may have regarding and pertaining to my qualifications and fitness for employment.</p> <p>I agree to hold such employers, references, educational/training institutions and any other persons giving references harmless from liability or damages for providing the requested information.</p> <p>A photocopy or fax of this authorization shall be as valid as the original.</p>	
Signature	
Date	

The City University of New York is an equal employment / affirmative action employer and does not discriminate on the basis of any attribute protected by federal, state or local laws