



Human Resources

ALL APPLICANTS: PLEASE READ

Before completing the attached forms, please be advised:

Eastern New Mexico University is an Affirmative Action and Equal Opportunity Employer. The University does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, national origin, age, disability, sexual orientation or any other characteristic protected by law. Persons seeking additional information about the University's nondiscrimination policy should contact the Director of Human Resources/AA, ENMU-Roswell, P O Box 6000, Roswell, NM 88202-6000. In accordance with the Americans with Disabilities Act (ADA), physically challenged individuals who require special accommodations should contact University Human Resources at (575) 624-7411 at least 24 hours prior to arrival on campus. New Mexico is an open records state. Therefore, it is the policy of the University to reveal to the public the identities of the applicants for whom interviews are scheduled.

All applicants must submit an application for each job for which they are applying. A complete application packet consists of a letter of interest, a resume, complete transcripts, and an ENMU-Roswell application form, Investigation Permission Form, three professional references, and a confidential data survey. **An incomplete application packet will invalidate your application.**

Applicants are responsible for complete packets.

Successful applicants will be subjected to a Background Investigation prior to appointment. Appointment will be conditional upon satisfactory completion of Background Investigation.

ALL ITEMS IN RED MUST BE COMPLETED TO BE CONSIDERED FOR EMPLOYMENT.

DO NOT PUT "SEE RESUME" ON APPLICATION

Be thorough and as detailed as possible when completing the necessary paperwork. All application packets must be in the Human Resources Office no later than the closing date/time on the job announcement.

Because of the large applicant response and the number of qualified applicants, you may not be contacted for an interview each time you apply for a position.

Call the Human Resources Office at (575) 624-7412 to inquire about available positions.

ENMU-Roswell reserves the right to cancel, change, or close any advertised position at any time. The decision to do so will be based upon the needs of the University and the final determination will rest with the President.

We appreciate and thank you for your interest in Eastern New Mexico University-Roswell, and if we can be of further assistance with your employment needs, please do not hesitate to contact us.

Eastern New Mexico University – Roswell

Department of Human Resources

Date: 1 October 2009
To: All prospective Faculty and Staff Employees
From: Director of Human Resources
Subject: Annual Report-Survey of Campus Crime and Security

Reference Section 668.46, 34 CFR, subject as above.

Pursuant to, and in compliance with the cited reference, the following information regarding the annual Survey of Campus Crime and Security is being provided to you, in conjunction with your application for employment, as a prospective employee of Eastern New Mexico University-Roswell (ENMU-R):

INFORMATION REQUIRED TO BE DISCLOSED:

The following disclosures are contained within the Survey of Campus Crime and Security:

- a. Murder/Non-Negligent Manslaughter
- b. Forcible Sex Offenses, including Forcible Rape
- c. Non-forcible Sex Offenses
- d. Robbery
- e. Aggravated Assault
- f. Burglary
- g. Motor Vehicle Theft
- h. Arson
- i. Negligent Manslaughter

Serving Those Who Serve Our Students...

The full text of the report is to be found at: <http://www.roswell.enmu.edu>

In addition you are, upon request, entitled to a paper copy of the report.

To request a paper copy of the report, contact Robert Newberry, Manager of Security, at Campus Extension 180 (624-7180), or the Campus Security Office in the IC Building Room 111.

Providing this information does not, in any way, imply any statement regarding the status of your application for employment; it is provided in observance of the laws covering such information.

If you have any questions regarding this matter, please contact the Department of Human Resources at Campus Extension 412 (624-7412). If you have any questions regarding the report, contact Capt. Newberry.

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PROFESSIONAL REFERENCES

Please provide three Professional References with number one being your last supervisor.

1. NAME _____
TITLE _____
PHONE NUMBER _____
COMPANY NAME _____
ADDRESS _____
CITY, STATE, ZIP _____

2. NAME _____
TITLE _____
PHONE NUMBER _____
COMPANY NAME _____
ADDRESS _____
CITY, STATE, ZIP _____

3. NAME _____
TITLE _____
PHONE NUMBER _____
COMPANY NAME _____
ADDRESS _____
CITY, STATE, ZIP _____

4. NAME _____
TITLE _____
PHONE NUMBER _____
COMPANY NAME _____
ADDRESS _____
CITY, STATE, ZIP _____

EASTERN NEW MEXICO UNIVERSITY

CONFIDENTIAL DATA SURVEY

Dear Applicant:

Your application for employment at Eastern New Mexico University has been received. State and federal regulations require this institution to compile information concerning: race, color, religion, ancestry, national origin, sex, age, and mental or physical handicap.

To assist us in complying with these requirements, we ask that you complete and return the Confidential Data Survey. Submission of the requested information is voluntary and anonymous and will not have bearing on your employment opportunity.

Thank you for your cooperation.

Position Applied for: _____

Department: _____

SEX: Male _____ Female _____

RACE/ETHNIC HERITAGE

(Choose the one category with which you most closely identify)

_____ American Indian or Alaskan Native _____ Asian
_____ Black (Not of Hispanic or Latino origin) _____ Hispanic or Latino
_____ White (Not of Hispanic or Latino origin)

VETERAN STATUS

Yes No

If you are a veteran, were you on active duty between August 5, 1964
And May 7, 1975 _____

*If yes, were you discharged from active duty within the last 48 months: _____

*If you are a veteran, did you ever enter the service after May 7, 1975 _____

*Are you rated by the Veterans Administration's disabled 30% or more? _____

*Were you discharged from active duty because of a disability received
in the line of duty? _____

HANDICAP STATUS

Do you consider yourself, or are you considered handicapped: _____

How did you discover this employment opportunity? Check one:

_____ Professional Journal _____ Chronicle of Higher Education
_____ Oral Communication _____ Announcement
_____ Local Employment Agency _____ Other _____

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DISCLOSURE REGARDING "INVESTIGATIVE CONSUMER REPORT" BACKGROUND INVESTIGATION

to which you have applied for employment, may request an investigative consumer report about you from a third party consumer reporting agency, in connection with your employment or application for employment (including independent contractor or volunteer assignments, as applicable). An "investigative consumer report" is a background report that includes information from personal interviews (except in California, where that term includes background reports with or without information obtained from personal interviews). The most common form of an investigative consumer report in connection with your employment is a reference check through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. You may request more information about the nature and scope of an investigative consumer report, if any, by contacting the Company.

You have the right, upon written request made within a reasonable time, to request (1) whether an investigative consumer report has been obtained about you, (2) disclosure of the nature and scope of any investigative consumer report and (3) a copy of your report. These reports will be conducted by **HR Screening Services, Inc., 521 Cedar Way, Oakmont, PA 15139, 800-261-6268, www.hrscreening.com**. The scope of this disclosure is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of investigative consumer reports throughout the course of your employment to the extent permitted by law.

Signature: _____ Date: _____

ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the separate document entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by _____ (“Employer”) at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by HR Screening Services, Inc., 521 Cedar Way, Oakmont, PA 15139, 800-261-6268, www.hrscreening.com and/or Employer. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

New York applicants only: Upon request, you will be informed whether or not a consumer report was requested by the Employer, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Employer by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law.

New York City applicants only: You acknowledge and authorize the Employer to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.

Washington State applicants only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Minnesota and Oklahoma applicants only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Employer.

Signature: _____ Date: _____

BACKGROUND INFORMATION

Applicants/Employees: Please provide the following information to facilitate a background check:

Last Name _____ First _____ Middle _____
 I have no middle name

Other Names/Alias _____

Social Security #* _____ Date of Birth* _____ Phone _____

Driver's License # _____ State of Driver's License** _____

Present Address _____

City/State/Zip _____

Please list any former address(es) over the past 7 years, including approximate dates:

Address: _____ Dates: _____

Address: _____ Dates: _____

Address: _____ Dates: _____

Address: _____ Dates: _____

Address: _____ Dates: _____

May we contact your current employer? YES: _____ NO: _____

The following information will be used for the application of state-specific or compensation-specific consumer reporting restrictions:

Anticipated Salary or Annual Compensation: \$ _____

State in which position being offered or where majority of work will be performed: _____

Signature _____ Date: _____

*This information will be used for background screening purposes only and will not be used as hiring criteria.

** If you will be requesting driving records, we recommend that you have this form notarized.

Note: If you do business in Utah, you cannot ask for DOB, driver's license, or SSN until either a confidential offer of employment or at the time the background report will be run.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every consumer reporting agency (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as if you pay your bills on time or have filed bankruptcy -- to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. §§1681-1681u, at the Federal Trade Commission's web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

You must be told if information in your file has been used against you.

Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.

You can find out what is in your file.

At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.

You can dispute inaccurate information with the CRA.

If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs -- to which it has provided the data -- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.

Inaccurate information must be corrected or deleted.

A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it.

However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.

If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.

You can dispute inaccurate items with the source of the information.

If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

Outdated information may not be reported.

In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.

Access to your file is limited.

A CRA may provide information about you only to people with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

Your consent is required for reports that are provided to employers, or reports that contain medical information.

A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.

You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.

Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.

You may seek damages from violators.

If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING:	PLEASE CONTACT:
CRAs, creditors and others not listed below	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580*202-326-3761
National banks, federal branches/agencies of foreign banks (word National or initials N.A. appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219*800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551*202-452-3693
Savings associations and federally chartered savings banks (word Federal or initials F.S.B. appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552*800-842-6929
Federal credit unions (words Federal Credit Union appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314*703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429*800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590*202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250*202-720-7051