WSIPC
Technology for Educational Communities

Application for Employment

(Please fill out completely. A resume may not substitute for the requested information)

WSIPC is an equal opportunity employer and does not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

General Information

Applicant name: _____ Date: _____

Position applied for: _____ Reference #: _____

Address: _____

Primary Telephone #: _____ Secondary Telephone #: _____

Type of employment desired: ☐ full-time ☐ part-time ☐ temporary

Date you will be available to start work: _____

	Yes	No
Are you able to meet the attendance requirements?	☐	☐
Do you have any objection to working overtime if necessary?	☐	☐
Can you travel if required by this position?	☐	☐
Have you ever been previously employed by our organization?	☐	☐
Have you ever been released from prison or been convicted of a crime in the past 10 years?	☐	☐

If yes, please explain (a conviction will not automatically bar employment):

How were you referred to us? _____

Employment History

Please provide all employment information for your past three employers starting with the most recent.
A resume may not be substituted for this section.

Employer: _____ Position held: _____

Address: _____ Telephone #: _____

Immediate supervisor and title: _____

Dates employed: From _____ To _____ Salary: _____

Job summary:

Reason for leaving: _____

Employer: _____ Position held: _____

Address: _____ Telephone #: _____

Immediate supervisor and title: _____

Dates employed: From _____ To _____ Salary: _____

Job summary:

Reason for leaving: _____

Employer: _____ Position held: _____

Address: _____ Telephone #: _____

Immediate supervisor and title: _____

Dates employed: From _____ To _____ Salary: _____

Job summary:

Reason for leaving: _____

Educational History

List school name and location, years completed, course of study, and any degrees earned:

School / Institution	City and State	Course of Study	Did you Graduate?		Type of Degree
			Yes ☐	No ☐	
			Yes ☐	No ☐	
			Yes ☐	No ☐	

Professional Licenses Held

List applicable licenses and certifications:

Other Skills and Qualifications

List seminars, schools, and workshops completed:

References

List 3 references' names, telephone numbers, and years known (do not include relatives):

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application, including any documents submitted during the recruitment process or interview, will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____ Date: _____