

APPLICATION FOR STAFF POSITION



Edgewood College
1000 Edgewood College Drive
Madison, WI 53711
608-663-2294

Position Applying for _____
Type of Employment Desired:
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Day
<input type="checkbox"/> Evening

PERSONAL INFORMATION

NAME _____ DATE _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP CODE

PHONE NUMBER: DAY: _____ EMAIL: _____
EVENING: _____ ARE YOU 18 YEARS OR OLDER? YES NO

Are you a U.S. citizen or otherwise currently authorized to obtain lawful employment in this country? YES NO

Have you ever been convicted by a court of law, fined, or forfeited collateral for breach or violation of any law, police, or traffic regulation other than minor traffic violation? (Note: drunken driving, reckless driving, hit-run driving, etc. are **not** minor traffic violations.) YES NO

If yes, provide further information as to the offense(s) – date, location of court, and so forth. If the job you are applying for requires you to operate a motor vehicle, include traffic convictions.

Edgewood College is an equal opportunity employer and does not discriminate on the basis of race, source of income, sexual orientation, national origin, religion, age, sex, disability, or other basis prohibited by applicable local, state, or federal fair employment laws or regulations. Applicants with a disability may request accommodations needed in the application and/or interview process.

I hereby consent to the duly authorized representative(s) of Edgewood College to contact any of my former employers, any of the educational institutions that I have attended, and any other person or organizations I have listed which might have information relevant to my application for employment. I further consent to those persons or organizations divulging relevant information to Edgewood College, notwithstanding that it might otherwise be confidential. I understand that any information obtained by Edgewood College in the course of those contacts will be treated in the strictest of confidence.

I certify that all statements made on this form are true and accurate to the best of my knowledge. I understand that consideration of this application and the continuation of any subsequent employment depends upon the truth and accuracy of this information.

Date: _____ Applicant's Name (print or type): _____
Applicant's Signature: _____

Please submit a copy of your resume to the Human Resources Office, if you have not already done so. Keep us advised of any changes in your address, interest, or availability.

The following information is not necessary, *only* if the information is included on the resume submitted.

EDUCATION AND TRAINING

Describe any other training you consider relevant to the position for which you are applying.

EMPLOYMENT EXPERIENCE

(List all employment positions held starting with most recent)

Institution _____

Dates of Employment: From _____ to _____

Full-time Part-time

Rank/Position/Title:

Name and Title of Immediate Supervisor:

Reason for Leaving: _____

Previous Employer

Dates of Employment: From _____ to _____

Full-time Part-time

Rank/Position/Title:

Name and Title of Immediate Supervisor:

Reason for Leaving: _____

Institution _____

Dates of Employment: From _____ to _____

Full-time Part-time

Rank/Position/Title:

Name and Title of Immediate Supervisor:

Reason for Leaving: _____

Previous Employer

Dates of Employment: From _____ to _____

Full-time Part-time

Rank/Position/Title:

Name and Title of Immediate Supervisor:

Reason for Leaving: _____

If additional space is needed, a supplemental page may be attached.

LICENSES AND CERTIFICATIONS

PERSONAL REFERENCES

	NAME	PHONE NUMBER	RELATIONSHIP TO APPLICANT
1.			
2.			
3.			