

UNIVERSITY OF WISCONSIN-STOUT

Application for Employment

*Please complete each section of this application accurately and legibly using black or blue ink.
Incomplete applications may be returned and possibly disqualify you from further consideration.*

PERSONAL INFORMATION

Position for which you are applying: _____ Name _____ Last First Middle Address _____ Street City State Zip Have you ever worked for the State of Wisconsin? Yes No If so, where: _____ Dates: _____ Have you ever worked at UW-Stout? Yes No If yes: Permanent LTE Student Dates _____ Department: _____	Today's Date: _____ Home Telephone () _____ Business Telephone () _____ Date Available for Work: _____
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Do you possess a valid driver's license or are you able to obtain one? Yes No

EDUCATION & TRAINING

School	Name and Location	Course of Study	# of Years Completed	Graduate?		Degree
				Yes	No	
High School						
Vocational/Technical						
College and/or Graduate						

SKILLS & TRAINING

Typing/keyboarding skills: Yes No Personal computer experience including software programs you are proficient in: 	List equipment, machinery or motorized vehicles you can operate:
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Describe any other Education, Training or Skills:

WORK EXPERIENCE (begin with your present or most recent employer)
If necessary, attach additional sheets using the format below to provide employment data.

Employer	Your Title	Dates of Employment - From: To:	Full-time Part-time Temporary	Starting Wage \$ Ending Wage \$
Address Telephone Number	Duties		Reason for Leaving: Work Reference (name & phone number): Relationship: Supervisor Co-worker	

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May we conduct a personal background check including contact of your references named above, and review other records as may be required for some positions? Yes No If not, why?

It is the policy of UW-Stout to provide reasonable accommodation for qualified individuals who are employees or applicants for employment. If you need assistance or accommodation for the application process because of a disability, please contact the Human Resources Office. Employment opportunities will not be denied to anyone because of the need to make reasonable accommodations for an individual's disability.

I UNDERSTAND THAT ANY FALSE INFORMATION OR SIGNIFICANT OMISSIONS MAY DISQUALIFY ME FROM FURTHER CONSIDERATION AND MAY BE JUSTIFICATION FOR MY DISMISSAL FROM EMPLOYMENT, IF DISCOVERED AT A LATER DATE. I CERTIFY THAT ALL THE INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT IN EVERY RESPECT.

Signature: _____ Date: _____

The safety and well being of all members of our campus community is very important at the University of Wisconsin-Stout. A copy of our annual security report may be found at the following website: <http://www.uwstout.edu/police/csa.htm>.