

# Application for Employment



We are an Equal Opportunity Employer and are committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## Personal Information

Name

Address		City	State	Zip
Phone Number	Mobile Number	Email Address		

## Position

Position You Are Applying For	Available Start Date	Desired Pay
Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal/Temporary		

## Education

School Name	Location	Years Attended	Degree Received	Major

## References

Name	Title	Company	Phone

## Employment History

May we contact your present/previous employers  Yes  No

<b>Employer (1)</b>	Job Title		Dates Employed
Work Phone	Supervisor		Supervisor Email
Address	City	State	Zip
<b>Employer (2)</b>	Job Title		Dates Employed
Work Phone	Supervisor		Supervisor Email
Address	City	State	Zip
<b>Employer (3)</b>	Job Title		Dates Employed
Work Phone	Supervisor		Supervisor Email
Address	City	State	Zip
<b>Employer (4)</b>	Job Title		Dates Employed
Work Phone	Supervisor		Supervisor Email
Address	City	State	Zip

## Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize Dakota Wesleyan University (or its designee) to investigate my past and present employment, education and activities and verify all data provided by me on this application, on related papers and in interviews. I authorize all individuals, schools, and/or firms named herein (except my current employer, if so noted) to provide any information requested about me. I release from all liability any persons, companies, corporations or education institutions supplying such information. I release Dakota Wesleyan University (or its designee) from any and all liability resulting from the verification of such information.

I agree that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either Dakota Wesleyan University or myself. I acknowledge that unless I enter into a written contract for employment for a specified period of time, my employment remains employment at will.

I understand that this employment application, or the granting of an interview, does not represent a contract of employment or a promise of future benefits by Dakota Wesleyan University.

Name (Please Print)	Signature
Date	