



Application for Employment

The University Club of Milwaukee



Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resource Department.

Position(s) applied for: _____ Date of application: _____

Name: _____ Social Security #: _____ - ____ - ____
Last First Middle

Address: _____
Street City State Zip Code

Telephone: _____ Mobile/Other: _____ E-mail Address: _____

Referral Source (How did you hear about us?): _____

If you are under 18 & it is required, can you furnish a work permit?.....Yes No

If no, please explain: _____

Have you been employed here before? If yes, give dates & positions: _____ Yes No

Are you legally eligible for employment in this country?.....Yes No

Date available for work..... _____ What is your desired salary range?.....\$ _____

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodation)?
This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes No Need more information about the job's "essential" functions" to respond."

Answering "yes" to either of the following questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of a crime?.....Yes No

If yes, please provide date(s) and details: _____

Employment History (Starting with most recent employer, if more space is needed please use a separate sheet)

Employer	Telephone		Month	Year	Month	Year
Street Address		City	State		Dates Employed / / to / /	
Compensation (Starting)						
Starting Job Title/Final Job Title		Commission/Bonus/Other Compensation				
		\$ per				
Compensation (Ending)						
Immediate Supervisor and Title		May we contact for reference?				
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				
Reason for Leaving		Commission/Bonus/Other Compensation				
		\$ per				
Summarize the type of work performed and job responsibilities						
Employer	Telephone		Month	Year	Month	Year
Street Address		City	State		Dates Employed / / to / /	
Compensation (Starting)						
Starting Job Title/Final Job Title		Commission/Bonus/Other Compensation				
		\$ per				
Compensation (Ending)						
Immediate Supervisor and Title		May we contact for reference?				
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				
Reason for Leaving		Commission/Bonus/Other Compensation				
		\$ per				
Summarize the type of work performed and job responsibilities						

Employment History (Starting with most recent employer)

Summarize any special training, skills, licenses &/or certificates that may assist you in performing the position for which you are applying:

Education Background (Starting with most recently attended)

School (Include City & State)	Years Completed	Completed	GPA	Major/Minor
		<input type="checkbox"/> Diploma/GED <input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma/GED <input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma/GED <input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Other		

References

Name	Title	Relationship	Telephone	Number of Years known

Application Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice and the employer reserves the same right to terminate any employment at anytime, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's President.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

This company does not tolerate unlawful discrimination in its employment practices. No question in this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, national origin, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found false, incomplete or misleading in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Signature of applicant

Date

/ /