



2615 East Avenue South, Suite 103
La Crosse, WI 54601
(608) 789-5620 or (800) 742-5627, FAX (608) 785-9939

APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, creed, color, ancestry or national origin, sex, age, sexual orientation, marital or parenthood status, disability, economic status, arrest or conviction record, military reserve membership, use or nonuse of lawful products away from work, or any other legally protected status.

PLEASE PRINT (use ink or type)

Date of Application _____

Position(s) Applied For _____

Desired Salary (OPTIONAL) _____

Name _____
Last First Middle

Address _____
Number Street City State Zip Code

Telephone (_____) _____ Email Address _____

If necessary, the best time to call you at home is _____

May we contact you at work ____ Yes ____ No If yes, give the best time to call _____

If you are offered a position and you are under 18, can you furnish a work permit? ____ Yes ____ No

Have you filed an application here before? ____ Yes ____ No If yes, give date _____

Have you ever been employed here before? ____ Yes ____ No If yes, give date _____

Are you employed now? ____ Yes ____ No

May we contact your present employer? ____ Yes ____ No

Do you have the legal right to work in the United States? ____ Yes ____ No
(The Immigration Reform and Control Act of 1986 requires employers to verify the legal status and right to work of all new hires. Verification must be obtained after the decision to hire has been made.)

On what date would you be available for work? _____

Are you available to work ____ Full-Time ____ Part-Time ____ Shift Work ____ Temporary

Can you travel if a job requires it? ____ Yes ____ No

Do you have a valid driver's license? ____ Yes ____ No If yes, which State? _____

Do you have proof of auto insurance? ____ Yes ____ No

Veteran of the U.S. Military service? ____ Yes ____ No

Military skills/training obtained _____

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex, ancestry or national origin, or other protected status.

<i>Employer</i>	<i>Telephone ()</i>	<i>Dates Employed From To</i>		<i>Summarize Work Performed and Job Responsibilities</i>
<i>Address</i>				
<i>Job Title</i>		<i>Hourly Rate/Salary (OPTIONAL)</i>		
<i>Supervisor</i>		<i><u>Start</u></i>	<i><u>Final</u></i>	
<i>Reason for Leaving</i>				
<i>May we Contact for Reference? ___Yes ___No ___Later</i>				
<i>Employer</i>	<i>Telephone ()</i>	<i>Dates Employed From To</i>		<i>Summarize Work Performed and Job Responsibilities</i>
<i>Address</i>				
<i>Job Title</i>		<i>Hourly Rate/Salary (OPTIONAL)</i>		
<i>Supervisor</i>		<i><u>Start</u></i>	<i><u>Final</u></i>	
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<i>Supervisor</i>		<i><u>Start</u></i>	<i><u>Final</u></i>	
<i>Reason for Leaving</i>				
<i>May we Contact for Reference? ___Yes ___No ___Later</i>				

Comments:

EDUCATION

	High School	College/University	Graduate/ Professional
School Name			
Years Completed/Degree (circle appropriate year)	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree			
Describe Course of Study			
Describe specialized training, apprenticeship, skills, and extracurricular activities			

Honors Received _____

Have you had any other job related training? ____Yes ____No If so, please describe:

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience:

List professional, trade, business, or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex, ancestry or national origin, or other protected status.)

State any additional information you feel may be helpful to us in considering your application:

REFERENCES

Give name, address, and telephone number of three (3) references who are not related to you and are not previous employers.

NAME	ADDRESS	PHONE NUMBER

Are you related to any member of the Workforce Connections, Inc. Board of Directors? ____ Yes ____ No

If so, whom? _____
(A list of Board of Director members can be supplied upon request.)

How did you hear about this position?

APPLICANT'S STATEMENT

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the Workforce Connections, Inc. service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, Workforce Connections, Inc. reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of Workforce Connections, Inc. has the authority to make any assurances to the contrary.

I give Workforce Connections, Inc. the right to investigate all references and to secure additional information about me, if job related. I give Workforce Connections, Inc. the right to investigate my criminal record, understanding that a criminal record is not necessarily a restriction to employment, as convictions will be considered only if they are substantially related to this particular job. I hereby release from liability Workforce Connections, Inc. and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.

Workforce Connections, Inc. is an equal employment opportunity/affirmative action employer. Workforce Connections, Inc. does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, State, or Federal law.

Signature of Applicant _____ Date _____

Submit Application

**Please also attach your cover letter and resume
to the email that will be generated upon clicking
"Submit Application".**