



EMPLOYMENT APPLICATION

Human Resources 1000 W. Campus Dr., Wausau, WI 54401
(715) 675-3331, ext. 5120 or 1-888-NTC-7144, ext. 5120
Fax: (715) 675-3523 Web site: www.ntc.edu Email: hral@ntc.edu

Applicants are considered for all positions without regard to sex, race, color, religion, creed, gender, national or ethnic origin, sexual orientation, age, marital or veteran status, disability, or other classifications protected by law.

(PLEASE PRINT) Indicating "See Resume" on application does not constitute a completed application. Any education used to meet the requirements of the position posted must be verified by a transcript, diploma, and/or certification. Photocopies of transcripts are accepted during the application process; official transcripts are required upon successful hire.

Date of application _____

Position Applying For: _____ Full Time Part Time
(Application forms will only be accepted for positions currently available)

Referral Source: Advertisement (Specify where) _____ Employee
 Other (Specify) _____ Friend

Full Name _____
Last First Middle

Former Name _____ Preferred Name _____

Email Address _____

Address _____
Number Street

City _____ State _____ Zip Code _____ County _____
Telephone (day) () - _____ Telephone (evening) () - _____

Have you filed an application here before? Yes No

If yes, for which position _____

Have you been employed here before? Yes No

If yes, give date and position _____

For the purpose of a background check, please list the states within which you have lived in the past 10 years:

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
(Proof of employment eligibility will be required upon employment) Yes No

Have you ever been convicted of a crime or do you currently have criminal charges pending? Yes No

If yes, please provide additional detail: (NOTE: Convictions and/or pending charges will not necessarily disqualify applicant from employment. Circumstances of the offense will be considered as they relate to the position.)

Education

	College/University	Graduate/Professional	Additional/Other
Institution Name			
Location			
Diploma/ Degree			
Major			
Minor			
Dates Attended			
Date Graduated			
# of credits			
Other			

Honors Received: _____

Indicate languages you speak, read, and /or write:

1. _____ 2. _____ 3. _____

Speak <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair	Speak <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair	Speak <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair
Read <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair	Read <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair	Read <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair
Write <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair	Write <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair	Write <input type="checkbox"/> Fluent <input type="checkbox"/> Good <input type="checkbox"/> Fair

Indicate your computer software experience: _____

Give three professional references who are not related to you.

Name	Title	Business	Telephone
			() -
			() -
			() -

Are you employed currently? Yes No May we contact your current employer? Yes No

Employment Experience

Starting with your present or most recent employer, please list your work experience, including any U.S. or other military experience. Including all employment whether full-time, part-time, summer, or temporary. Attach a separate sheet, if necessary. This section must be fully completed. Listing "See Resume" or other similar language is NOT acceptable and may eliminate your application from further consideration.

List any Significant or Occupational License(s) you have and attach verification:

Institution/ Employer:			Description of your position responsibilities:
Address (Street, City, State):			
Position Title:			
Supervisor's name:			
Reason for leaving:			
# hours/ week:			
Salary:			
Dates Employed:	From: (m/yr)	To: (m/yr)	
May we contact this employer:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

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Address (Street, City, State):			
Position Title:			
Supervisor's name:			
Reason for leaving:			
# hours/ week:			
Salary:			
Dates Employed:	From: (m/yr)	To: (m/yr)	
May we contact this employer:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

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Reason for leaving:			
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Salary:			
Dates Employed:	From: (m/yr)	To: (m/yr)	
May we contact this employer:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

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Salary:			
Dates Employed:	From: (m/yr)	To: (m/yr)	
May we contact this employer:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

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Position Title:			
Supervisor's name:			
Reason for leaving:			
# hours/ week:			
Salary:			
Dates Employed:	From: (m/yr)	To: (m/yr)	
May we contact this employer:	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Do you have any limitations which would preclude or hinder you in performing the essential functions/duties of the job for which you are applying? Yes No If yes, please describe:

Do you have any relatives who work for NTC? Yes No
If yes, please provide their name and relationship.

APPLICANT'S STATEMENT

I certify that all answers given herein are true and complete to the best of my knowledge. I authorize any and all current and former employers and institutions of learning to release my personnel records and/or transcripts to NTC or its agents in connection with this application, and release and hold harmless such organizations from any claims on my part in connection with such release or response. I understand that this application is not, nor intended to be a contract of employment. In the event of employment, I understand that false or misleading information given in my application or interview(s) may disqualify me from consideration for hire or may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the College. As a public employer, this application and other employment materials you provide may be considered public records open to inspection under Wisconsin's public records law. By signing below, I authorize the procurement of my motor vehicle records to evaluate my insurability for purposes of driving an NTC owned vehicle. NTC complies with its obligations under the Drivers privacy Protection Act (The DPPA).

I authorize the release of reference information _____ Social Security Number ____ / ____ / ____
(Initials)

Signature of Applicant

Date

Name (please print): _____

As a recipient of federal funds, Northcentral Technical College is required to conduct business as an Equal Opportunity and Affirmative Action employer. This means that NTC must not only ensure that protected groups do not suffer discrimination, NTC must further guarantee positive actions to hire and promote members of those groups. Completion of this form is voluntary and will not affect your application status.

NAME: _____

APPLIED FOR: _____

We appreciate your cooperation in assisting us with our periodic reporting. Please check off the appropriate boxes.

GENDER: Male Female

RACE: Alaskan Native Asian/Pacific Islander African American/Black
 Caucasian/White Latino/a Native American

DISABLED VETERAN:

VIETNAM ERA VETERAN:

ARE YOU A PERSON WITH A DISABILITY: Yes No

Defined by Section 504 of the Rehabilitation Act of 1973, a person with a disability is “anyone with a physical or mental disability that substantially limits one or more of such life activities as walking, seeing, hearing, speaking, or learning.”

Northcentral Technical College is an Affirmative Action/Equal Opportunity employer committed to the diversity of faculty, staff and students. We do not discriminate on the basis of veteran status, marital status, race, color, religion, national origin, age, gender, sexual orientation or disability status in its educational programs or in admission to, access to, treatment in, or employment in its programs or activities as required by Title IV, Civil Rights Act 1964; Title IX, Education Amendments Act of 1972; and Section 504, Rehabilitation Act of 1973 and regulations promulgated there under, 34 C.F.R. Part 100 (Title VI), and Part 104 (Section 504).