



3501 University Ave Stop 8157
Grand Forks, ND 58202

Applicant Name

Application for Employment

University of North Dakota Alumni Association and Foundation
herein referred to as the "Organization"

Position Applied For

The Organization provides equal opportunity in employment practices to all employees and applicants for employment. No person shall be discriminated against on the basis of race, color, religion, sex, national origin, age, physical or mental disability, status with respect to marriage or public assistance, or participation in lawful activity off the employer's premises during non-working hours which is not in direct conflict with the essential business, related interests of the employer.

The Organization will provide reasonable accommodations in the application or interviewing process. If you need reasonable accommodations, please contact the Human Resources Department at 701-777-2611

Employees and applicants shall not be subjected to harassment, intimidation, threats, coercion or discrimination based on their status as a member of a protected group or due to the filing of a complaint, the assisting or participation in an investigation, hearing or compliance review regarding equal employment opportunity, or opposing any acts that are in violation of or exercising any rights protected by the Equal Employment Opportunity policy and related laws and regulations.

Date

An Equal Opportunity Employer

General Information

Name Last		First	Middle Initial	Telephone Numbers
Present Address Street		City	State	Zip Code
Alternate Address Street		City	State	Zip Code
Email Address				
Title of Position Desired		Type of Work Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		Salary Expectation
Date Available to Begin Employment		List Hours and Days Available for Work		
Have you received a current copy of the job description and essential functions of this position? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you able, either with or without reasonable accommodation, to perform the essential functions of the position for which you are applying? (Answer this question only if you answered "Yes" to the previous question) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you over the age of 16? <input type="checkbox"/> Yes <input type="checkbox"/> No		Federal law requires that individuals entering an employment relationship, before they begin employment, provide documentation of eligibility for employment within the United States. If offered employment will you be able to provide proof of your eligibility for employment? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted, plead guilty or no contest to a criminal offense other than a minor traffic offense? Yes No If yes, please explain in some detail, including what county and state, and in what year. The seriousness, date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may be considered in relationship to the nature of the position and will not automatically result in disqualification of employment.				
Have you ever been terminated, asked to resign or resigned in lieu of termination from any position. If yes, please explain. Yes No				

School or Training	Name and Address	Course of Study	Grade Average	Circle Highest Year Completed	Diploma, Certificate or Degree
High School				1 2 3 4 GED	
Business or Vocational School				1 2 3 4 GED	
College or University				1 2 3 4 GED	
Graduate School				1 2 3 4 GED	
Other					
Military Service or Training	Military Branch	Length of Service	Highest Rank	Describe any pertinent training or schooling received	

Employment History Starting with your current or most recent position, please complete the sections below. You are only required to provide starting and ending dates of employment for those positions held within the last ten (10) years. Exclude any information that might indicate gender, age, race, color, national origin, religion, pregnancy, disability, or any other characteristic protected by law. Use an additional sheet if necessary.

Current or Most Recent Employer			Type of Business			Telephone Number		
Address		Street		City		State		Zip Code
Starting Date	Month	Year	Ending Date	Month	Year	Beginning Salary		Current or Ending Salary
Position Title and Brief Description of Responsibilities								
Reason for Leaving				Manager's Name			May we contact this employer? If not, please explain	

Next Most Recent Employer			Type of Business			Telephone Number		
Address		Street		City		State		Zip Code
Starting Date	Month	Year	Ending Date	Month	Year	Beginning Salary		Current or Ending Salary
Position Title and Brief Description of Responsibilities								
Reason for Leaving				Manager's Name			May we contact this employer? If not, please explain	

Next Most Recent Employer			Type of Business			Telephone Number		
Address		Street		City		State		Zip Code
Starting Date	Month	Year	Ending Date	Month	Year	Beginning Salary		Current or Ending Salary
Position Title and Brief Description of Responsibilities								
Reason for Leaving				Manager's Name			May we contact this employer? If not, please explain	

Describe all the time periods of one month or more not covered in the employment section above. You are only required to provide starting and ending dates for those activities taking place within the last five (5) years. Exclude any information that might indicate gender, age, race, color, national origin, religion, pregnancy, disability, or any other characteristic protected by law.

Time Period				Description of Activities
From		To		
Mo	Yr	Mo	Yr	
Mo	Yr	Mo	Yr	

References Please list below at least three (3) individuals who are not relatives or employed by the Organization, who have observed and will be able to comment on specific competencies, skills, and knowledge you have developed that may be applicable to the position for which you are apply (for example, work-related references.)

Name	Company and Position	Address	Telephone

Skills Please summarize any special job-related skills, knowledge or abilities acquired from employment or other experiences that qualify you to meet the job requirements of the position for which you have applied and that may assist us in considering you for this position.

Complete this section if the position for which you are applying requires office/clerical skills or computer competency.

Indicate your competency in any skills you have acquired through education, training or experience.

Computer Skills List or describe specific skills or knowledge of specific hardware or software applications.

Other (Please describe)

How did you hear about this position? _____

Please Read Before Signing

I certify that the information provided on this application is true and complete. I understand that any omission or false information may disqualify me from further consideration and/or result in my termination if I am hired.

I understand that nothing contained in this employment application, in the granting of an interview or hiring process is intended to create a contract between the Organization and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that any such promise or guarantee would be binding up the Organization only if made in writing and signed by an authorized representative of the Organization. I understand and agree that employment with the Organization is "at will." If an employment relationship is established, I understand that I have the right to terminate my employment at any time, for any reason or no reason. I further understand that the Organization similarly has the right to terminate my employment at any time for any lawful reason.

Signature _____ Date _____

I authorize the Organization to fully investigate my background. I understand that investigation may include but not be limited to, contacting past employers and obtaining information regarding my employment history, verifying my educational and training history, conducting a criminal background check, and other means necessary to evaluate my application for employment. In addition, all job applicants may be requested to undergo testing for the presence of illegal drugs as a condition of employment. I further release and hold harmless the Organization, its officers, employees and agents, and any former employer or other individual providing any information about me from any and all claims arising from the Organization's investigation of my application for employment.

Signature _____ Date _____