



FACULTY APPLICATION FOR EMPLOYMENT

Williston State College

1410 University Ave
Williston, North Dakota 58801

Table with 3 columns: checkboxes for 'Follow instructions carefully', 'Print or type', 'Provide detail - do not use "see resume"', 'Check for errors before submitting', and 'If accommodation or assistance is needed...'. Includes 'Office Use' header.

Position applying for:

When will you be available to begin work?

General Information

Form with fields: Name (Last, First, Middle Initial), Home or Cell Telephone, Mailing Address, City, State, Zip Code.

Can you provide proof, if hired, that you are eligible to work in the United States: [] Yes [] No

Have you ever been convicted of a crime other than a minor traffic violation? [] Yes [] No

If yes, please explain

(Convictions are not an absolute bar to employment but will be considered in relationship to the job requirements.)

** Please be advised that background checks will be performed on all applicants offered a position at Williston State College. **

Are you at least 18 years of age? [] Yes [] No

Employment History:

- Start with your current or last job - include armed forces service and self-employment.
- Any change of job title under the same employer should be considered a separate position.
- **ATTACH EXTRA SHEETS** using the same format if you have additional employment history.

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|---|---|------------------------------|-------------------------------|---|
| May we contact your current employer for a reference? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Applicable |
| Employer | | Telephone No. | Supervisor's Name | |
| Type of Business | Address | | | |
| Your Job Title | Dates Employed (indicate months & years) | | Average Hours Worked Per Week | |
| | From: | To: | | |
| Duties: | | | | |
| Reason for Leaving | | | | |
| Employer | | Telephone No. | Supervisor's Name | |
| Type of Business | Address | | | |
| Your Job Title | Dates Employed (indicate months & years) | | Average Hours Worked Per Week | |
| | From: | To: | | |
| Duties: | | | | |
| Reason for Leaving | | | | |

| | | |
|--------------------|---|-------------------------------------|
| Employer | Telephone No. | Supervisor's Name |
| Type of Business | Address | |
| Your Job Title | Dates Employed (indicate months & years) | Average Hours Worked Per Week |
| | From: To: | |
| Duties: | | |
| Reason for Leaving | | |

I certify that all information contained in this application and any attachments is true and complete to the best of my knowledge. I understand that any willful misrepresentation, false statement, or omission by me in the application or interview process will be cause for rejection of my application or termination of my employment. I authorize investigation of all statements made on this application and any attachments. I authorize Williston State College to contact my references and verify the information that is obtained. I release all persons, companies, and organizations from liability for providing or receiving such information. I further understand that this employment application and other employment related documents are not contracts of employment; and, that any oral or written statements to the contrary are hereby expressly disavowed. I hereby acknowledge that if offered a position with Williston State College, my appointment will include a probationary period.

| | | | |
|-------------------|--|--------------|--|
| Signature: | | Date: | |
|-------------------|--|--------------|--|

All information provided is subject to the North Dakota Open Records Law.

For informational purposes only, please indicate below how you became aware of this position:
