Phone: 763-682-4112 www.wtc.k12.mn.us

## **Employment Application**

## **PERSONAL DATA:**

Last Name	First Name Middle Name		Middle Name	
Address	City	State	Zip	
Cell Phone	Home Phone	Email		
POSITION DESIRED: W	hich position are you applying for? _	,		

EDUCATION: Please list the schools attended, starting with the most recent first.							
Name of School, City & State	Dates Attended	Diploma or Degree	GPA				

**PREVIOUS WORK EXPERIENCE:** Please provide the following information of your last three (3) employers, assignments or volunteer activities, starting with the most recent.

Date of Employment Month & Year	Name, Address & Contact Information of Employer	Position	Reason for Leaving
From			
То			
From			
То			
From			
То			

RELEVANT RECREATION	ONAL, EXTRAC	CORRICULAR AND/C	A COMMONITY ACTIV		
PERSONAL REFERENCE position.	CES: Please list	(3) people who would	speak to your qualificati	ons for the desired	
Full Name	Rela	ationship to Applicant	Cell or Work Number	How long have you known the applicant?	
MILITARY EXPERIENC	E:				
Branch	Rank	Total Years of Service	Skills & Duties		
CERTIFICATION					
I certify that the information misleading information immediate termination.  I authorize Wright Technemployment and education communicate information persons designated as reemployment and education	ical Center to co on. I authorize in regarding my peferences to fully	ontact former employer my former employers a previous employment, a	oplication, or if employments s and educational organizational organizational organizational grades.	nizations regarding my ations to fully and freely I authorize those	
other words, the relations terminate the employmer and complete discretion	ehalf of the orga ship will be entire nt relationship at to end the emplo vill have the right fic written contra	anization by the Director ely voluntary in nature t any time and without byment relationship what. Moreover, no agent, act of employment sign	or, the employment relation and either I or my emplocause. With appropriate en I choose and for reast representative, or employed on behalf of the organization.	ionship will be "at-will." In byer will be able to e notice, I will have the full sons of my choice. oyee of Wright Technical	
I HAVE CAREFULLY RE TERMS.	EAD THE ABO\	/E CERTIFICATION A	ND I UNDERSTAND AI	ND AGREE TO ITS	
APPLICANT SIGNATURE			DATE OF APPLICATION		

Wright Technical Center does not discriminate on the basis of race, color, creed, religion, national origin, sex, age, marital status, status with regard to public assistance, sexual orientation, or disability in its programs and activities. For inquiries, please call 763-682-4112.