

Wyoming Education Association

TOGETHER WE SUCCEED!

115 East 22nd
Cheyenne, WY 82001
800-442-2395



EMPLOYMENT APPLICATION

WEA IS AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER AND ENCOURAGES ALL PERSONS INCLUDING MINORITIES, WOMEN, AND INDIVIDUALS WITH DISABILITIES TO APPLY.

WYOMING EDUCATION ASSOCIATION

Employment Application

Position
Title _____

NOTE: All Information should be clearly printed or typed.

Name _____

Address _____ Home Telephone
Number _____

City, State, Office Telephone
Zip _____ Number _____

Social Security # E-mail
(LAST 4 DIGITS ONLY) _____ Address _____

If you are known to schools or references by another name, please
give name _____

When could you report for
work? _____

Are you legally eligible to work in the
U.S.? _____

(Verification will be required upon hire)

EDUCATION

	Name & Location	Dates Attended	Major Field of Study	Specify Diploma, Degree, or Certificate received
High School				
Certified Technical/ Occupation Specific Training				
College or University				
Post Graduate Study				
Other (including military)				

COMPLETE ALL SECTIONS

EXPERIENCE: (Begin with most recent position.)

Employer	Dates of Employment From: To:	Salary Start:
Street City & State Zip	Job Title	Current: or Final:
Name and Title of Supervisor		Telephone Number
Reason for Leaving		
Duties		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Employer	Dates of Employment From: To:	Salary Start:
Street City & State Zip	Job Title	Current: or Final:
Name and Title of Supervisor		Telephone Number
Reason for Leaving		
Duties		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Employer	Dates of Employment From: To:	Salary Start:
Street City & State Zip	Job Title	Current: or Final:
Name and Title of Supervisor		Telephone Number
Reason for Leaving		
Duties		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Employer	Dates of Employment From: To:	Salary Start:
Street City & State Zip	Job Title	Current: or Final:
Name and Title of Supervisor		Telephone Number
Reason for Leaving		
Duties		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO		

(Use additional sheets, if necessary)

ADDITIONAL DATA:

Please explain your experiences and skills which directly relate to and qualify you for this position. List honors, hobbies and organizational memberships, which you feel would enhance your application. Use additional sheets, if needed.

Have you ever been convicted as an adult of a crime, excluding minor traffic offenses? Yes No

If "yes," please explain: _____

In compliance with the Landrum Griffin Act, conviction for certain crimes disqualifies an individual for employment with WEA for a specified period of time. If you have checked "yes" above, a representative of WEA will discuss this matter with you before you continue to pursue this vacancy.

The above information is accurate and complete to the best of my knowledge. I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between WEA and myself, and that any willful falsification of this application may be grounds for dismissal if subsequently hired. I further understand that, if I accept an offer of employment, I am required to provide acceptable documentation of my identity and authorization to work in the United States as required by the Immigration Reform and Control Act.

Signature

Date