

**Lussier Community Education Center, Inc.  
 55 S. Gammon Road, Madison, WI 53717  
 (608)833-4979 Fax: (608) 833-6919**

**EMPLOYMENT APPLICATION**

**AN EQUAL OPPORTUNITY EMPLOYER  
 AA/EOE**

*Please complete all pages completely and accurately. Print clearly in ink or type.*

<b>Last Name</b>		<b>First Name</b>		<b>Middle</b>	
<b>Position Applied For:</b>				<b>Date of Application</b>	
<b>Street Address</b>				<b>Home Phone</b>	
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Business Phone</b>		
<b>Have you ever applied for employment with LCEC? <input type="checkbox"/> Yes <input type="checkbox"/> No</b> <b>If yes, month and year _____</b>				<b>Social Security #</b>	
<b>Previously employed by LCEC <input type="checkbox"/> Yes <input type="checkbox"/> No</b> <b>If yes, position _____</b>					
<p><b>Since your 18<sup>th</sup> birthday have you EVER been convicted of any violations (or as a juvenile, been waived into adult court and convicted) or are you now subject to a pending charge? Please list all convictions and all pending charges and include relevant dates for felonies, misdemeanors or conviction by a military court-martial. In accordance with state and local law, pending criminal charges or any convictions will not be used or considered unless they are substantially related to the circumstances of the particular job</b></p> <p><input type="checkbox"/> <b>No</b></p> <p><input type="checkbox"/> <b>Yes, Explain:</b></p>					
<p><b>Type of Employment you are seeking:</b></p> <p><input type="checkbox"/> <b>Permanent</b>    <input type="checkbox"/> <b>Full Time</b>    <input type="checkbox"/> <b>Part Time</b>    <input type="checkbox"/> <b>Seasonal</b>    <input type="checkbox"/> <b>Limited Term</b></p>					

## EDUCATION & TRAINING

SCHOOL	NAME & LOCATION OF SCHOOL	DATES ATTENDED	DEGREE/DIPLOMA
GRADUATE OR PROFESSIONAL			
COLLEGE/ UNIVERSITY			
BUSINESS, TRADE, VOCATIONAL OR TECHNICAL SCHOOL			
HIGH SCHOOL			
OTHER TRAINING, EDUCATION, SKILLS NOT COVERED ABOVE			

## EMPLOYMENT HISTORY

*Please start with your current or most recent employer.*

<b>EMPLOYER</b>	<b>ADDRESS</b>
<b>YOUR JOB TITLE</b>	<b>NAME , TITLE, &amp; PHONE# OF SUPERVISOR</b>
<b>REASONS FOR LEAVING OR CONSIDERING LEAVING</b>	<b>DATES OF EMPLOYMENT</b> From _____ to _____ Full time Hrs per Week _____ No of Yrs ____ No of Mos. _____ Part time Hrs per Week _____ No of Yrs ____ No of Mos. _____
	<b>RATE OF PAY</b> BEGINNING \$ _____ per _____ ENDING \$ _____ per _____
<b>YOUR DUTIES &amp; RESPONSIBILITIES:</b>	

<b>EMPLOYER</b>	<b>ADDRESS</b>
<b>YOUR JOB TITLE</b>	<b>NAME , TITLE, &amp; PHONE# OF SUPERVISOR</b>
<b>REASONS FOR LEAVING OR CONSIDERING LEAVING</b>	<b>DATES OF EMPLOYMENT</b> From _____ to _____ Full time Hrs per Week _____ No of Yrs _____ No of Mos. _____ Part time Hrs per Week _____ No of Yrs _____ No of Mos. _____  <b>RATE OF PAY</b> <b>BEGINNING \$</b> _____ <b>per</b> _____ <b>ENDING \$</b> _____ <b>per</b> _____

**YOUR DUTIES & RESPONSIBILITIES:**

<b>EMPLOYER</b>	<b>ADDRESS</b>
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**YOUR DUTIES & RESPONSIBILITIES:**

<b>EMPLOYER</b>	<b>ADDRESS</b>
<b>YOUR JOB TITLE</b>	<b>NAME , TITLE, &amp; PHONE# OF SUPERVISOR</b>
<b>REASONS FOR LEAVING OR CONSIDERING LEAVING</b>	<b>DATES OF EMPLOYMENT</b> From _____ to _____ Full time Hrs per Week _____ No of Yrs _____ No of Mos. _____ Part time Hrs per Week _____ No of Yrs _____ No of Mos. _____  <b>RATE OF PAY</b> <b>BEGINNING \$</b> _____ <b>per</b> _____ <b>ENDING \$</b> _____ <b>per</b> _____

**YOUR DUTIES & RESPONSIBILITIES:**

List any volunteer, professional, trade, business, or civic activities and offices held. You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status.

Describe to what extent your training and experience have given you the technical knowledge, skill, and interest to perform the type of work you are applying for:

**REFERENCES:** Provide the names, addresses and telephone numbers of three references who are not related to you and are not previous employers:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

May we obtain references from your employers listed in this application? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If no, please explain:

If you are considered for employment with Lussier Community Education Center, Inc., you will be asked to fill out a Background Information Form. Wisconsin's Fair Employment Law, s. 111.31 – 111.395, Wisconsin Statutes, prohibits discrimination because of criminal record or pending charge, unless the record or charge substantially relates to the circumstance of the particular job or licensed activity.

I certify that all the information given on this application is true and complete to the best of my knowledge and agree that any false or missing information may disqualify me for this position. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# AFFIRMATIVE ACTION

## INFORMATION REQUESTED FOR AFFIRMATIVE ACTION USE ONLY AND SHALL REMAIN CONFIDENTIAL

THE INFORMATION BELOW IS VOLUNTARY AND WILL BE USED FOR THE PURPOSE OF RESEARCH AND REPORTING TO VARIOUS AFFIRMATIVE ACTION, EQUAL OPPORTUNITY AND CIVIL RIGHTS COMPLIANCE CONTRACT AGENCIES. IT WILL ALSO BE USED TO MONITOR THIS AGENCY'S EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION EFFORTS.

NAME \_\_\_\_\_

POSITION APPLIED FOR \_\_\_\_\_

DO YOU CONSIDER YOURSELF HANDICAPPED? \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES, WHAT IS YOUR DISABILITY? \_\_\_\_\_

BASED ON YOUR UNDERSTANDING OF THE POSITION DESCRIPTION, DO YOU FEEL THAT YOUR HANDICAPPED STATUS WILL ADVERSELY AFFECT YOUR ABILITY TO PERFORM SATISFACTORILY THE ASSIGNED POSITION? \_\_\_\_\_ YES \_\_\_\_\_ NO

SEX: \_\_\_\_\_ FEMALE \_\_\_\_\_ MALE

ETHNIC GROUP:

\_\_\_\_\_ BLACK - Not of Hispanic origin. All persons having origins in the any of the Black racial groups of Africa.

\_\_\_\_\_ ASIAN OR PACIFIC ISLANDER – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.

\_\_\_\_\_ AMERICAN INDIAN OR ALASKAN NATIVE – All persons having origin in any of the original peoples of North America and who maintain cultural identification through tribal association or community recognition.

\_\_\_\_\_ HISPANIC – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

\_\_\_\_\_ WHITE – Not of Hispanic origin. All persons having origins in any of the peoples of Europe, North Africa, or the Middle East.

REFERRAL SOURCE: PERSON TO PERSON (Please identify) \_\_\_\_\_

NEWSPAPER AD (Name of newspaper) \_\_\_\_\_

JOB BULLETIN BOARD (Please Identify) \_\_\_\_\_

EMPLOYMENT AGENCY (Please Identify) \_\_\_\_\_

OTHER (Please Identify) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_