



**WICHITA STATE
UNIVERSITY**

RHATIGAN STUDENT CENTER

Wichita State University Rhatigan Student Center does not discriminate in its programs and activities on the basis of race, religion, color, national origin, gender, age, sexual orientation, marital status, political affiliation, status as a veteran or disability. Please complete all blanks. If a question does not apply, please mark "N/A".

APPLICATION FOR EMPLOYMENT

Date of Application: _____

Please type or print in ink. Complete all sections of this application even if accompanied by a resume.

Personal Information

Last Name	First	Middle	Email Address:	
Street Address:			Home Phone # ()	Mobile Phone # ()
City:	State:	Zip:	Work Phone # ()	

General Information

Position(s) applied for:	Hours preferred:	Desired wage:
Employment interest: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary	Date available to work:	
Have you ever been bonded?		
Are you legally eligible for employment in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been terminated or asked to resign a position? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you been employed here before? <input type="checkbox"/> Yes <input type="checkbox"/> No When? Under what name?	Have you been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No When? What was the felony? What was the outcome?	
Did you serve in the US Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No In what branch?	Describe any military training relevant to the position for which you are applying:	

Employment History (List all employment below including jobs held while in school or in the military. Record your present or most recent position first. Be sure to complete all questions on each job. A resume may be attached, but **PLEASE DO NOT SUBSTITUTE THE RESUME FOR THE INFORMATION REQUESTED BELOW.**)

Name and Address of Employer	Position(s) held. List your duties.	Why did you leave?	Name and phone # of supervisor.
1.			Name
Dates: From/To	Salary: Starting/Ending	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone #
2.			Name
Dates: From/To	Salary: Starting/Ending	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone #
3.			Name
Dates: From/To	Salary: Starting/Ending	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone #
4.			Name
Dates: From/To	Salary: Starting/Ending	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone #

Explain any gaps in employment: _____

Summarize any special skills, training, licenses, certifications, etc. that you hold: _____

*Current/Past memberships in civic, professional or other organizations, etc., that you hold: _____

Summary of Qualifications: Briefly summarize any additional qualifications you feel are important in considering your application for employment.

*Exclude those which may disclose your race, color, gender, age, national origin, religious preference, disability, sexual orientation, political affiliation, veteran or marital status.

Education

School	Name and Location of School	Highest Grade Completed	Grade Average	Did you graduate?	Degree or Certificate?
High School/ GED		<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12		Yes <input type="checkbox"/> No <input type="checkbox"/>	
College				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Graduate School				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Trade, Business, Technical, Other				Yes <input type="checkbox"/> No <input type="checkbox"/>	

Academic honors or other special recognition: (Exclude those which may disclose your race, color, sex, age, national origin, political affiliation, sexual orientation, religious preference, disability, veteran or marital status.) _____

Clerical Applicants Only: Can you operate or do you have experience with the following:

Adding Machine	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Accounting	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How long? _____	Billing	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How long? _____	
Computer	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Programs Used: _____				Length of Time: _____	_____			
							Length of Time: _____	_____			

How were you referred to Rhatigan Student Center?

RSC Website
 Newspaper ad
 RSC Employee
 On my own
 Workforce Center
 Other (please specify) _____

Applicant's Statement: To the best of my knowledge, all information on this application is true and correct. I understand that should an investigation disclose material misrepresentation or falsification, my application may be disqualified, or if employed, my employment and all rights and privileges of my employment may be immediately terminated. I understand that in order to determine my qualifications for positions I apply for, it may be necessary to investigate my employment history, educational accomplishments, criminal history, and credit reports. I direct the custodian of these records to release this information to any authorized agent of Rhatigan Student Center. I release any individual, institution, business or organization from any and all liability for damages which might arise from the release of pertinent information. I understand that if the position I am applying for requires the operation of either employee or employer-owned motor vehicles, I must maintain personal licensure appropriate to the vehicle and responsibilities of the position. Further, I authorize Rhatigan Student Center to request and obtain Drivers License Records necessary to confirm my licensure and responsible driving history. By executing and submitting this application, I state that I am genuinely interested in working in the position for which I am applying and am making this application for no other purpose. Federal law requires verification of identity and employment eligibility for all new employees. I will, if hired, present original documents meeting these requirements before starting to work. I agree to conform to all rules and policies of Rhatigan Student Center. I understand that if hired, my employment is 'at-will' and that Rhatigan Student Center may terminate my employment relationship at any time, with or without notice and with or without cause.

Applicant Signature: _____ **Date:** _____

Rhatigan Student Center - WSU is an affirmative action/equal employment opportunity employer committed to diversity.

VOLUNTARY SELF IDENTIFICATION FORM



The information contained on this form is for equal employment opportunity purposes only. As required by law, we must record certain information. Data from this form will support efforts to ensure compliance with affirmative action. Applicants are invited to participate by reporting their status as handicapped, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) applicants are under no obligation to respond, but may do so if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our affirmative action. We value diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Section 1: General Applicant Information

Please complete the information requested on this page. Thank you for your cooperation.

Date: _____

Name: _____ **Position applied for:** _____

Section 2: Please check all that apply (See reverse of this page for definitions)

✓	Race or Ethnic Identity	✓	Gender	✓	Veteran Status	✓	Other
<input type="checkbox"/>	Hispanic or Latino	<input type="checkbox"/>	Male	<input type="checkbox"/>	Vietnam Era Veteran	<input type="checkbox"/>	Individual with Disabilities (check all that apply)
<input type="checkbox"/>	White (not Hispanic/Latino)	<input type="checkbox"/>	Female	<input type="checkbox"/>	Special Disabled Veteran	<input type="checkbox"/>	Visual
<input type="checkbox"/>	Black or African American (not Hispanic/Latino)	<input type="checkbox"/>		<input type="checkbox"/>	Other Protected Veteran	<input type="checkbox"/>	Hearing
<input type="checkbox"/>	Native Hawaiian or Pacific Islander (not Hispanic/Latino)	<input type="checkbox"/>		<input type="checkbox"/>	Armed Forces Service Medal Veteran	<input type="checkbox"/>	Speech
<input type="checkbox"/>	Asian (not Hispanic/ Latino)	<input type="checkbox"/>		<input type="checkbox"/>	Recently Separated Veteran	<input type="checkbox"/>	Physical
<input type="checkbox"/>	American Indian or Alaskan Native (not Hispanic/Latino)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Learning
<input type="checkbox"/>	Two or More Races (not Hispanic/Latino)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other

I wish to voluntarily self-identify

Signature: _____

EEOC RACE/ETHNIC/VETERAN IDENTIFICATION CATEGORIES

Hispanic or Latino	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
White (not Hispanic/Latino)	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
Black or African Americans (not Hispanic or Latino)	A person having origins in any of the black racial groups of Africa.
Native Hawaiian or Other Pacific Islander (not Hispanic/Latino)	A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
Asian (not Hispanic or Latino)	A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, Philippine Islands, Thailand, and Vietnam.
American Indian or Alaska Native (not Hispanic/Latino)	A person having origins in any of the original people of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
Two or More Races (not Hispanic/Latino)	All persons who identify with more than one of the above five races.
Veteran of the Vietnam-Era	A person who: (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released there from with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all other cases; or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in any other location.
Special Disabled Veteran	Means (i) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans' Affairs for a disability (A) rated at 30 percent or more, or (B) rated at 10 or 20 percent in the case of a veteran who has been determined under Section 38 U.S.C. 3106 to have a serious employment handicap or (ii) a person who was discharged or released from active duty because of a service connected disability.
Other Protected Veteran	Includes any veteran who served on active duty in the U.S. military, ground, navel or air service in a war, campaign or expedition in which a campaign badge has been authorized under laws administered by the Department of Defense.
Armed Forces Service Medal Veteran	Includes any veteran who, while serving on active duty in the Armed Forces, participated in a United States military operation for which a service medal was awarded pursuant to Executive Order 12985.
Recently Separated Veteran	Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one year period beginning on the date of such veteran's discharge or release from active duty.