



## Professional Work Experience

List most recent position first. Fill out completely; do not indicate "refer to resume." All professional work experience must be listed; if necessary attach additional information.

Name & Location of Employer: \_\_\_\_\_

Supervisor Name, Title & Phone: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Salary: Beginning \_\_\_\_\_ Current \_\_\_\_\_

Position Title: \_\_\_\_\_  Full Time  Part Time

Nature of Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Supervisor Name, Title & Phone: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Salary: Beginning \_\_\_\_\_ Current \_\_\_\_\_

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May we contact all past and present employers?  Yes  No

If not, indicate which one(s) you do not wish us to contact: \_\_\_\_\_

**Are you legally eligible to work in the United States?**  Yes  No

Have you been convicted of a serious crime within the last five years which is substantially related to the responsibilities of the position for which you are making application or of past positions held?  Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been disciplined or discharged for theft of company or public property or related offenses?  Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been disciplined or discharged for fighting, assault or related offenses?  Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been disciplined or discharged for insubordination?  Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been disciplined or discharged for violating a safety rule(s)?  Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been disciplined or discharged for sexual harassment?  Yes  No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Discuss briefly those unique qualifications that you possess which would enhance your position as a potential professional employee at Carbon County Higher Education Center.

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Discuss what you have done in your most recent positions to implement positive changes which would relate to your field of instruction and/or professional position for which you are applying.

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State briefly your views on the role of a community college in relation to the public, faculty, and students it serves.

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### Professional References

List those individuals, except former supervisors, who are familiar with your work and/or professional credentials.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Organization: \_\_\_\_\_ City and State: \_\_\_\_\_

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Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Organization: \_\_\_\_\_ City and State: \_\_\_\_\_

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Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Organization: \_\_\_\_\_ City and State: \_\_\_\_\_

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Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Organization: \_\_\_\_\_ City and State: \_\_\_\_\_

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### Certification

I hereby certify that, to the best of my knowledge and belief, the answers to the foregoing questions and statements made by me are complete and true. I understand that any false information, omissions or misrepresentations of facts called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize any present employer or supervisor, past employer or supervisor, college, university or other institution of learning, law enforcement agency, state agency, federal agency, private business, military branch or the National Personnel Records Center, personal references, and for other persons to give records or information they may have concerning my employment, worker's compensation claims, criminal history, motor vehicle history, earnings history, health, character and employment records or any other information requested to CARBON COUNTY HIGHER EDUCATION CENTER. I voluntarily and knowingly unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Carbon County Higher Education Center does not discriminate on the basis of race, color, national origin, gender, age, disability, political affiliation, religion, or belief in relation to admission, treatment of students, access to programs and activities, or terms and conditions of employment.

Inquiries concerning Title VI, title IX, Section 504 of Rehabilitation Act of 1973 or AA may be referred to the Executive Director,

Carbon County Higher Education Center

705 Rodeo St.

Rawlins, WY 82301

(307) 328-9204

or

Office for Civil Rights, Denver Office, U.S. Department of Education,

Cesar E. Chavez Memorial Building, Suite 310, 08-7010

1244 Speer Blvd

Denver, CO 80204-3582

(303) 844-5695

FAX (303) 844-4303 or TDD (303) 844-3417

or

Wyoming Labor Standards Department,

1510 East Pershing Blvd.,

Cheyenne, WY 82002

(307) 777-7261

