

Skills and Qualifications

Summarize any special training, skills, languages, licenses and/or certificates that may assist you in performing the position for which you are applying: _____

Computer Skills:

Microsoft Office 365 Applications

- Outlook Word PowerPoint SharePoint Customer Relations Management
 OneDrive Excel OneNote Microsoft Teams

Employment History

Starting with your most recent employer, provide the following information:

Employer		Telephone + area code	
Street Address		City	ST Zip
Job Title		Compensation Hourly Salary \$ per	
Immediate supervisor and title		Commission/Bonus/Other Compensation \$	
Supervisor's email		May we contact the supervisor for reference? Yes No Later	
Dates Employed		Month / Year	Month / Year
Why did you leave?			
Summarize the type of work performed and job responsibilities.			
What did you like most about your position?			
What were the things you liked least about the position?			

Employer		Telephone + area code	
Street Address		City	ST Zip
Job Title		Compensation Hourly Salary \$ per	
Immediate supervisor and title		Commission/Bonus/Other Compensation \$	
Supervisor's email		May we contact the supervisor for reference? Yes No Later	
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Employment History continued...

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Explain any gaps in your employment, other than those due to personal illness, injury or disability:

If not addressed on previous page, have you ever been fired or asked to resign from a job? Yes No

If yes, please explain: _____

Educational Background

Starting with your most recent school attended, provide the following information:

School (include City and St)	# of Years Completed	Completed	Major/Minor
		<input type="checkbox"/> Diploma GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	
		<input type="checkbox"/> Diploma GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	
		<input type="checkbox"/> Diploma GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____	

References

List names and telephone numbers of three business/work references who are **not** related to you and are **not** previous supervisors. If not applicable, list three school or personal references who are **not** related to you.

Name	Title	Relationship to you	Telephone + Area Code	Email	# of Years Known

I understand that this employment application and any other documents presented to me in the course of applying for employment with WCI are not contracts or promises of employment. If employed, I understand the duration, hours, nature, compensation and benefits of my employment may be changed and modified from time to time without limitation or condition. Employment is at will in nature, meaning that WCI or the employee may terminate employment at any time, with or without notice.

I understand that if I am chosen as a finalist for this position, a criminal background investigation, drivers record and credit check will be performed.

I authorize WCI to investigate all statements on this application, including work history and education. I authorize my previous employers and work references to release any and all personnel data, including performance evaluations and complaints against me to WCI as it relates to my application for employment at WCI. Specifically, I release and waive any and all claims, including but not limited to claims for defamation, libel and slander, that I may have against any such individual or company as a result of their compliance with WCI's request for information.

I authorize all schools, colleges, universities and other educational institutions I have attended to provide WCI with all information which it seeks related to the dates of my attendance, the degrees I have earned, the courses I have taken, my grade point average and related matters. I waive and release any and all claims I may have against these institutions as a result of their compliance with WCI's request for information.

I certify that the information I have provided in this application is true and correct to the best of my knowledge and belief. I understand that any false statements or omissions in this employment application form, or made in the course of applying for employment with WCI, may disqualify me for employment or cause my subsequent dismissal from employment.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the WCI's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, full understand and accept all terms of the foregoing Applicant Statement.

Signature of applicant

Date