

## **Our Mission**

We serve the law. We teach it, study it, practice it, and work to make it just. This is our mission.

Our students come to William Mitchell with diverse traits, talents, and experiences, yet they have in common a desire to transform themselves into skilled and ethical legal professionals. They learn from us and from each other. We challenge and support them, and we are responsive to their family and career commitments.

We study law and the legal profession as critical observers and active participants. Our legal education incorporates scholarship and practice, maintains a strong connection to the profession, is intellectually rigorous, and instills an ethic of service to clients and community.

Our students graduate with the practical wisdom to put the law to work.

### **Our Vision**

To pioneer a demanding legal education so engaged with the profession that our graduates have an enduring advantage as they meet the challenges of an increasingly complex world.

# **Employment Application**

To be completed by applicant:			
Today's Date:			
NAME		For office use only:	
Last:		Requisition #:	
		Applicant #:	
First:	Middle Initial:	First Interview:	
		Follow Up:	
POSITION(S) DESIRED		Second Interview:	
1		Follow Up:	
2		·	
3			

#### \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_ Name: FIRST Social Security #: \_\_\_\_\_ Address: \_ STATE Are you at least 16 years of age? ☐Yes ☐No Are you legally eligible to work in the United States in the position for which you are applying? □Yes □No NOTE: If hired you will be required to show proof of eligibility to work in the United States. **PLEASE READ THOROUGHLY.** A conviction record will not necessarily disqualify you from employment consideration. Have you ever been convicted of or pled guilty to a crime? \(\sigma\)Yes \(\sigma\)No This includes all misdemeanors (except parking violations), gross misdemeanors, and felonies. Date of conviction or plea: State and county of conviction: CHECK ALL THAT APPLY. Shifts Available: □Days □Evenings □Nights Other: Hours Desired: □Full-time (40hrs./wk.) □Part-time (# of hours per week: ) □Regular □Temporary Referred by: \_\_\_\_\_ Are you, or have you ever been, employed by William Mitchell? □Yes □No If yes, list employment dates: to Position held: List other names under which you have been employed: \_\_\_\_\_ **EMPLOYMENT RECORD** List in order with the most current employment first. Please include resumé. May we contact your present employer? ☐ Yes ☐ No If no, why? 2. Name of 1. Organization Address (Street) City, State ( ) ( ) ( ) Phone Salary: Salary: Salary: Job Title # hrs./wk.: # hrs./wk.: # hrs./wk.: ( ) ( ) **Supervisor & Phone Summary of** Job duties and responsibilities **Dates** employed From: To: From: To: From: To:

PLEASE COMPLETE ALL SECTIONS. USE INK. PLEASE PRINT.

**Reason for leaving** 

Education			Circle	_	Graduated?		Avg.									
		Name and Address		last year completed	Dates	Yes	No	grade	Degree/Major							
High School/ G.E.D.				9 10 11 12												
College				1 2 3 4 5 6												
<b>Graduate School</b>				1 2 3 4												
Vocational/ Technical																
Business/ Military/Other																
<b>OTHER EXPERIENCE</b> If you have had other experience (e.g., volunteer, educational or military) related to the position for which you are applying, please list relevant information below.																
OFFICE SKILLS SUMMARY (if applicable to job you are applying for)																
List word processing, database and other software with which you are proficient:																
•	ng, database a	nd other software with which yo		:												
•		nd other software with which yo	ou are proficient	:	Office Use Only:	FOR I	POSITIO	ONS REQ	UIRING DRIVING A							
•		•	ou are proficient	Expiration Date	Office Use Only: Verification	FOR I		_	UIRING DRIVING A							
TO BE COMPLETE		ERED, LICENSED, OR CERTIFIED	ou are proficient		-	Do you	MO' have a	TOR VEH								
TO BE COMPLETE State	D BY REGIST	ERED, LICENSED, OR CERTIFIED	ou are proficient  APPLICANTS	Expiration Date	Verification	Do you	MO' have a	TOR VEH	r's license? □Yes □No							
TO BE COMPLETE State	D BY REGIST	ERED, LICENSED, OR CERTIFIED  Current Number	ou are proficient  APPLICANTS  relatives). TO BE	Expiration Date	Verification  LL APPLICANTS.	Do you	MO have a v	TOR VEH	r's license? Yes No							

<b>REFERENCES:</b> Work or education related (do not list friends or relatives). TO BE COMPLETED BY ALL APPLICANTS.				
NAME	ADDRESS	PHONE (DAYTIME)	OCCUPATION	REFERENCE REQUESTED
1.		( )		
2.		( )		
3.		( )		

## **AGREEMENT** (Please read thoroughly and sign below)

I authorize the investigation of my background, including all the information contained in this application and information in the interview. I understand that misrepresentation or omission of information in connection with my application and/or interview will be sufficient cause, in and of itself, for rejection or dismissal whenever discovered. I understand and agree that any offer of employment is dependent upon satisfactory completion of William Mitchell College of Law's pre-employment investigation, which may include but is not limited to a pre-placement physical exam, criminal history check, educational and work history verification, reference checks, and any investigation required by local, state or federal laws. I authorize any former school, employer, person, corporation, credit agency or government agency to give the College information they may have about me. In consideration of the College's review of this application, I release the College and all providers of information from any liability as a result of furnishing and receiving this information. I understand that if I am hired by William Mitchell, and unless I am covered by a collective bargaining agreement containing a contrary provision, my employment will be for an indefinite period of time and will be "at will," which means that either I or the College may terminate the employment relationship at any time and for any or no reason. I further understand that, if hired, my at-will employment status may only be changed in a written contract signed by the president of William Mitchell and that no representative of the College has the authority to make any oral promise to me concerning my employment. Finally, I also understand that William Mitchell retains the right to change current policies and benefits at any time, with or without notice to me. William Mitchell strives to provide a safe, healthy and productive work environment and supports a tobacco-free, alcohol-free, weapon-free and drug-free environment.

Signature:	Date:	
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