

Name: _____

Date: _____

Position: _____

Job Posting #: _____
(if applicable)



University
of Windsor

Application for Employment

(For non-Academic positions)

Department of Human Resources
Windsor, Ontario
N9B 3P4
519-253-3000

CONFIDENTIAL

We appreciate your interest in working at the University of Windsor. Please complete this application and enclose an up-to-date resume. If you are applying for a position that is covered by one of our union collective agreements, you should be aware that we must allow our qualified unionized staff the first opportunity for transfer or promotion to such a position. If we are unable to select a qualified University employee, your application will then be considered for the position for which you have applied.

It is the University's philosophy that every person is free and equal in dignity and rights regardless of race, creed, age, colour, sex, marital status, ancestry, place of origin, ethnic origin, citizenship, record of offenses, family status, sexual orientation or disability.

THIS APPLICATION WILL BE KEPT ON FILE FOR SIX MONTHS.

(It can be renewed toward the end of that period)

**THE UNIVERSITY OF WINDSOR IS COMMITTED TO EMPLOYMENT EQUITY AND WELCOMES APPLICATIONS FROM
ABORIGINAL PEOPLES, PERSONS WITH DISABILITIES, WOMEN,
AND VISIBLE MINORITIES.**

P E R S O N A L I N F O R M A T I O N

Last Name	Given Name	Initial
Mailing Address (Include Postal Code)		Telephone: Work: Home:
Email:		

A P P L I C A T I O N I N F O R M A T I O N

Position applied for OR work preferred _____

Are you seeking Regular Regular Would you be willing to work as a casual employee?
Full-time Part-time Yes No
Employment Employment

Please indicate hours/days available if part-time or casual _____

Minimum salary expected _____ Date available _____

E D U C A T I O N A N D T R A I N I N G

	Name & Address	Length of Course	Field of Study	Grade/Diploma/ Degree Completed
High School/GED				
Commercial or Technical Training				
Undergraduate College/University				
Other Continuing Education				

Professional Qualifications/Memberships/Licenses if applicable:

All applicants are encouraged to include volunteer or unpaid experience related to this position.

S P E C I A L I Z E D S K I L L S

A. SECRETARIAL/CLERICAL

Word Processing Spreadsheets Databases Medical Terminology Keyboarding _____ wpm

Dictaphone Data Entry Graphics Scientific Terminology Other _____ specify

Shorthand Speed _____

Please specify computer packages you are familiar with below, and rate your proficiency as follows:

1) course only/no experience 2) some working knowledge 3) proficient 4) expert ex: WP 8(3)

B TECHNICAL SKILLS

C TRADES/MAINTENANCE SKILLS

E M P L O Y M E N T R E C O R D List most recent employment first

Start Date	Employer	Address	Position Held
End Date	Reason for Leaving	Supervisor's Name & Title	Annual Salary
Start Date	Employer	Address	Position Held
End Date	Reason for Leaving	Supervisor's Name & Title	Annual Salary
Start Date	Employer	Address	Position Held
End Date	Reason for Leaving	Supervisor's Name & Title	Annual Salary

G E N E R A L

If you have or are currently working for the University of Windsor please indicate; Dates, Position, Department, Supervisor

T B M O N I T O R I N G

Have you recently been outside of Canada for 12 months or more? Yes No

If yes, please explain: _____

I N A C C O R D A N C E W I T H O N T A R I O H U M A N R I G H T S C O D E

Are you at least 18 years of age? Yes No

Are you legally entitled to work in Canada? Yes No

Have you ever been convicted of a criminal offence for which a pardon has not been granted? Yes No

If yes, please explain: _____

REFERENCES

List three persons, other than relatives or personal friends, to whom you have reported and have direct knowledge of your work experience and/or education.

	Name	Company	Position	Telephone
1.	_____	_____	_____	_____
	_____	_____	_____	_____
2.	_____	_____	_____	_____
	_____	_____	_____	_____
3.	_____	_____	_____	_____
	_____	_____	_____	_____

May we contact your present employer for a reference? Yes No Previous Employers Yes No

If no, please state reasons: _____

RELEASE/DECLARATION

I authorize anyone (unless otherwise specified) to provide the University of Windsor with any relevant information that may be required by them in accordance with this employment application. I hereby waive any privilege of confidentiality with respect to the release of this information to the University of Windsor.

I certify that all the above statements made by me are true with the full knowledge and understanding that if it is found I have falsified in this application, such falsification will constitute full and sufficient grounds for dismissal from the employ of the University of Windsor.

Date: _____ Signature: _____

Thank you for taking the time to complete this application and for your interest in the University of Windsor. If you are a person with a disability and require technical aids or alternative arrangements for tests or interviews, please advise our department of these special needs, and any ways in which we can be of assistance, if you are contacted.

⇒ Please DO NOT Put Your Name on This Form ⇐

Please enter job posting number:

External Applicant Self-Identification Form

TO THE APPLICANT:

The University of Windsor is a welcoming community committed to equity and diversity in our teaching, learning, and work environments. In pursuit of the University's Employment Equity Plan, members from designated groups are encouraged to complete the External Applicant Self-Identification form.

Completing the External Applicant Self-Identification form is voluntary. **Should you not wish to self-identify, please check mark here and submit the form.**

I do not wish to complete this questionnaire to self-identify at this time.

The External Applicant Self-Identification form invites you to voluntarily indicate whether you are a member of a designated group. The terminology used for the designated groups are per the Employment Equity Act and Federal Contractors Program.

The four federally designated groups identified:

- **Indigenous/Aboriginal peoples**
- **Persons with disabilities**
- **Racialized People/Visible Minorities**
- **Women**

The University of Windsor includes **Sexual/Gender minorities** as a fifth designated group.

For an alternative format of this form, please contact: Office of Human Rights, Equity & Accessibility (OHREA) at 519-253-3000 ext. 3400 or email ohrea@uwindsor.ca

Updated August 2021

1. To advance equity, I wish to self-identify for the purpose(s) selected below:

- Statistics (related to applicant pool representation)
- Recruiting/Selection Process (consideration in the hiring process)

2. For the purposes of employment equity, a person is an Indigenous/Aboriginal person if First Nations (Status or Non-Status), Inuit, or Métis Nation.

Based on this definition, do you identify as an Indigenous/Aboriginal person? Please select one.

Yes or No

3. For the purposes of employment equity, “persons with disabilities” means persons who have a long-term or recurring physical, mental, sensory, psychiatric, or learning impairment and who:

- a)** consider themselves to be disadvantaged in employment by reason of that impairment, or
- b)** believe that an employer or potential employer is likely to consider them to be disadvantaged in employment by reasons of that impairment, or
- c)** includes persons whose functional limitations owing to their impairment have been accommodated in their current job or workplace.

Based on this definition, are you a person with a disability? Please select one.

Yes or No

4. For the purposes of employment equity, members of racialized people/visible minorities mean persons, other than Indigenous/Aboriginal peoples, who are non-white in colour/race, regardless of place of birth. Please select one.

Based on this definition, are you a member of racialized people/visible minority in Canada?

Yes or No

5. For the purposes of employment equity, women are a designated group.

Do you identify yourself as a woman? Please select one.

Yes or No

6. For the purposes of employment equity, the University of Windsor includes sexual/gender minorities as a fifth designated group. This would include persons who identify as gay, lesbian, bi-sexual, transgender, inter-sexed or two-spirited.

Do you identify yourself as a member of a sexual/gender minority? Please select one.

Yes or No

Thank you for completing the External Applicant Self-Identification form!