

**United Way of Walworth County  
Executive Director Job Application**

Please email completed application, resume, and cover letter to Frank@theWhitingGroup.com.

**United Way Worldwide Mission:** United Way seeks to improve lives by mobilizing the caring power of communities around the world to advance the common good.

**United Way of Walworth County Mission:** To unite communities, increase and focus resources, and inspire people to improve lives in Walworth County, Wisconsin.

**United Way of Walworth County Vision:** To help meet the health, education, and financial stability needs of residents of Walworth County through voluntary and cooperative efforts.

**United Way of Walworth County Values:** Respect, Integrity, Commitment, Compassion, Stewardship, Partnership, Service-orientation.

**PERSONAL INFORMATION:**

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Pay: \_\_\_\_\_

**EMPLOYMENT ELIGIBILITY:**

Are you a US Citizen? YES NO

If No, are you allowed to work in the US? YES NO

Have you ever worked for the United Way of Walworth County? YES NO

If yes, write the start and end dates: \_\_\_\_\_

Have you ever been convicted of a felony? YES NO

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

**CONSENT TO BACKGROUND & REFERENCE CHECK:**

I, \_\_\_\_\_, hereby authorize United Way of Walworth County, Inc. to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that United Way of Walworth County may utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

I authorize the United Way of Walworth County to conduct a reference check with my present and/or previous employer(s). I understand that reference information may include, but not be limited to, verbal and written inquiries or information about my employment performance, professional demeanor and character, rehire potential, dates of employment, salary and employment history.

My signature below authorizes my former or current employers and references to release information regarding my employment record with their organizations and to provide any additional information that may be necessary for my application for employment to the United Way of Walworth County. I knowingly and voluntarily release all former and current employers, references, and the United Way of Walworth County from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the United Way of Walworth County.

I further authorize the United Way of Walworth County to obtain feedback and references from my supervisors over the course of my employment with the United Way of Walworth County. I understand that subsequent and continued employment with the United Way of Walworth County may be subject to this feedback.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name - Printed: \_\_\_\_\_

*United Way of Walworth County is an equal opportunity employer in its policies, actions and goals in compliance with state, federal and local laws and regulations. It is the policy of UWWC to grant equal opportunity to all qualified persons without regard to race, color, age, gender, sexual orientation, pregnancy, religion, disability, national origin or other legally recognized basis for illegal discrimination.*