

## **Internal Application for Reduction in Force**

|                     |                                 | Applicant information                                              |                  |  |  |  |  |
|---------------------|---------------------------------|--------------------------------------------------------------------|------------------|--|--|--|--|
| Full Name:          |                                 |                                                                    |                  |  |  |  |  |
|                     | Last                            | First                                                              | M.I.             |  |  |  |  |
| Address:            |                                 |                                                                    |                  |  |  |  |  |
|                     | Street Address                  |                                                                    | Apartment/Unit # |  |  |  |  |
|                     | City                            | State                                                              | ZIP Code         |  |  |  |  |
|                     | •                               |                                                                    |                  |  |  |  |  |
| Phone Number:       | EMPL ID:                        |                                                                    |                  |  |  |  |  |
|                     | IIND I                          | stornal Employment Duofono                                         |                  |  |  |  |  |
| Candidates may b    |                                 | ternal Employment Preferent which they are qualified in all depart |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
| Please list any spe | ecific departments that you are | e interested in working for:                                       |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 | ND Employment Information                                          |                  |  |  |  |  |
| Please list your Ui | ND experience here, starting w  | ith your most recent position.                                     |                  |  |  |  |  |
| Job Title:          |                                 | Start Date:                                                        |                  |  |  |  |  |
| Department:         |                                 | Supervisor's Name                                                  | e:               |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
| Job Duties:         |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
| Job Title:          |                                 | Start Date:                                                        |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
| Department:         |                                 | Supervisor's Name                                                  | e:               |  |  |  |  |
| Job Duties:         |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |
|                     |                                 |                                                                    |                  |  |  |  |  |

|                          |                                                              | UND Em                    | ployment In        | formation Contin     | ued   |                                                                                                                 |
|--------------------------|--------------------------------------------------------------|---------------------------|--------------------|----------------------|-------|-----------------------------------------------------------------------------------------------------------------|
| Job Title:  Department:  |                                                              |                           | Start Date:        |                      |       |                                                                                                                 |
|                          |                                                              |                           | Supervisor's Name: |                      |       |                                                                                                                 |
| Job D                    | outies:                                                      |                           |                    |                      |       |                                                                                                                 |
|                          |                                                              |                           |                    |                      |       |                                                                                                                 |
|                          |                                                              |                           |                    |                      |       |                                                                                                                 |
|                          |                                                              |                           | Additio            | nal Skills           |       |                                                                                                                 |
|                          | Outlook                                                      |                           | Excel              | nai Skins            |       | Access                                                                                                          |
|                          | Word                                                         |                           | PowerPoint         |                      |       | Perceptive Content/ ImageNow                                                                                    |
|                          | Famis                                                        |                           | Qualtrics          |                      |       | JobX                                                                                                            |
|                          | PeopleSoft                                                   |                           | Other              |                      |       | Other                                                                                                           |
|                          | <ul><li>☐ Finance</li><li>☐ Student</li><li>☐ HRMS</li></ul> |                           |                    |                      |       |                                                                                                                 |
|                          |                                                              |                           | Educ               | cation               |       |                                                                                                                 |
| High                     | School Attended                                              | :                         |                    |                      |       |                                                                                                                 |
| Colle                    | ge/ University/ T                                            | echnical Schools Attended | :                  |                      |       |                                                                                                                 |
| Major Area of Study:     |                                                              | _ Minor Area of Stud      | dy:                |                      |       |                                                                                                                 |
| Type of Degree Received: |                                                              |                           |                    | _ Date Graduated:    |       |                                                                                                                 |
|                          |                                                              | Applicant                 | s Acknowle         | dgment and Agree     | men   | t                                                                                                               |
| posit<br>and I           | ion may affect ur                                            | nemployment benefits. I c | ertify that the    | information given by | me in | ffered. Refusal of an offered<br>this application is true in all respects<br>red sufficient cause for denial of |
| <br>Empl                 | oyee Signature                                               |                           |                    | Date                 |       |                                                                                                                 |

Please forward completed application and resume to Peggy Varberg, HR Manager at <a href="mailto:peggy.varberg@und.edu">peggy.varberg@und.edu</a> or Twamley Hall Room 313, Human Resources, Mail Stop 7127.