



Employment Application

Program, services and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.	Date of Interview (Month/Day/Year): / /
Application Data	Position Applied for:
How did you find this job opening?	

Full Name: _____ E-mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Mobile/Pager/Other: _____

Date Available to Start: _____ Social Security Number: _____ - _____ - _____

If you are under 18 years of age, can you provide a work permit? Yes No if no, explain: _____

Have you ever worked for this company? Yes No If yes, when? _____

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Can you provide proof, if hired, that you are eligible to work in the United States? Yes No

Have you ever been convicted of a crime other than a minor traffic violation? Yes No If yes, give dates and details (convictions are not an absolute bar to employment but will be considered in relationship to the job requirements).

Driver's license number (if applicable to position) _____ State: _____

Education History

Name and location of High School: _____ Did you graduate? _____

Name and location of College: _____ Years attended: _____

Degrees completed: _____ Other Subjects Studied: _____

Trade, Business or Correspondence School: _____ Years attended: _____

Subject Studied: _____ Did you graduate? _____

Summarize Your Special Skills and Qualification



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Previous Employment (begin with most recent position)

Date of Employment: From ___/___/___ To ___/___/___ Position Held: _____

Company Name _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities:

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving:

May we contact this employer for a reference? Yes No

Date of Employment: From ___/___/___ To ___/___/___ Position Held: _____

Company Name _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities:

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving:

May we contact this employer for a reference? Yes No

Date of Employment: From ___/___/___ To ___/___/___ Position Held: _____

Company Name _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities:

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving:

May we contact this employer for a reference? Yes No



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Miscellaneous

Are you willing to accept employment that requires travel? Yes No

Check the following you are willing to accept. Day Only Occasionally Overnight Frequently Overnight

Check the geographic location(s) you are willing to work in. Write "ALL" for anywhere. _____

Eastern ND Western ND South Dakota Minnesota Montana Colorado/Wyoming

Are you willing to provide your own transportation if necessary for your employment? Yes No

If you are/were required to register for Selective Service have you done so? Yes No

If no, state your reason:

Are you a veteran who received an honorable discharge and served more than 180 consecutive days or full-time active duty in the US Army, Navy Air Force, Marines or reserve component thereof, including the National Guard or Reserve? Yes No

I certify that all information contained in this application and any attachments is true and complete to the best of my knowledge. I understand that any willful misrepresentation, false statement, or omission by me in the application or interview process will be cause for rejection of my application or termination of my employment. I authorize investigation of all statements made on this application and any attachments, and I release all persons, companies, and organizations from liability for providing or receiving such information. I further understand that this employment application and other employment related documents are not contracts of employment; and, that any oral or written statements to the contrary are hereby expressly disavowed.

Signature of Applicant: _____ Date: _____