



8921 E. Hwy. 10, P.O. Box 1611  
 Bismarck, North Dakota 58502-1611  
 (701) 258-5234 • Fax (701) 223-5961

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Department Manager.

TODAY'S DATE: \_\_\_\_\_ EMPLOYMENT APPLICATION

**PERSONAL DATA**

Name: \_\_\_\_\_ Soc. Sec. No.: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
No. Street City State Zip Code

Previous Address: \_\_\_\_\_  
No. Street City State Zip Code

Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

**EMPLOYMENT INTERESTS**

Position Desired: \_\_\_\_\_ Date you can start: \_\_\_\_\_

Type of employment:  Full-Time  Part-Time  Temporary

DAYS AND TIME AVAILABLE							
	MON	TUE	WED	THU	FRI	SAT	SUN
FROM							
TO							

**Check Below the Hardware and Software You Have Operated or Experienced**

- Personal Computer       Windows       PowerPoint       Great Plains
- Web browser       Word       Access       PeachTree Accounting
- Microsoft Outlook       Excel       WordPerfect       Other ( \_\_\_\_\_ )

**EDUCATION**

Type of School	Name & Address of School	Did you Graduate?	Degree Granted	Major Subject
High School				
Undergraduate College				
Graduate/ Professional				
Business, Trade or Technical School				

Any current schooling? \_\_\_\_\_

**WORK EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	DATES EMPLOYED		WORK PERFORMED
Address	From	To	
Telephone Number	HOURLY RATE / SALARY		
Starting Job Title	Starting	Final	
Final Job Title	Reason for leaving		
Supervisor			

Employer	DATES EMPLOYED		WORK PERFORMED
Address	From	To	
Telephone Number	HOURLY RATE / SALARY		
Starting Job Title	Starting	Final	
Final Job Title	Reason for leaving		
Supervisor			

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Supervisor			

**Describe any specialized training, apprenticeship, skills and extra-curricular activities**

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**Describe any job-related training received in the United States military**

**PERSONAL / PROFESSIONAL REFERENCES – do not include family members or past supervisors**

Name	Phone Number	Best Time to Call	Occupation

**APPLICANT STATEMENT**

I certify that all information I have provided in order to apply for and secure work for the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for 1 year. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's President.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

**Do Not Sign Until You Have Read The Above Applicant Statement.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_