

# Company Name

## Application for Employment

**Incomplete applications WILL NOT be considered**

Title of position for which you are applying:	Date of Application	Date Available for Work
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Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_ County: \_\_\_\_\_

Are you 18 years of age or over?  Yes  No If no, state Date of Birth: \_\_\_\_\_

Education: Did you graduate from high school or receive a GED?  Yes  No School Attended: \_\_\_\_\_

How many years of education have you had? (Circle one) 7 8 9 10 11 12 13 14 15 16 17 18 19 20 20+

**IMPORTANT FACTS ABOUT INFORMATION ON YOUR APPLICATION:**  
 This application is to assist in the hiring process. Certain information requested on the application is not public. It will be released only to you or to persons within the organization who need to know it in order to perform their job duties. If you are employed by this organization, the data will be available to the Internal Revenue Service and the Social Security Administration for payroll and tax purposes.

Private Data	Why we ask for it	Are you legally obligated to provide it?	What may happen if you don't provide it?
Date of Birth (If under 18)	To comply with child labor laws	Yes	Failure to provide information may be cause for rejecting an application.
Mailing Address	To be able to send you notices	Yes	Failure to provide information may be cause for rejecting an application
Residence Telephone	To be able to contact you to determine availability for interview	No	We might not be able to contact you for an interview
Sex, Racial/Ethnic Group, <i>(Information is requested on separate form.)</i>	To be able to make Equal Opportunity reports as required of us by law	No	We will not be able to determine whether our selection process results in unfair discrimination, or to take affirmative action in our hiring.
Conviction Record	To determine whether we may legally accept an application from you and to determine whether your record may be a job-related consideration.	Yes	We will not be able to make determinations required by law

Name and Location of College, University, Technical Schools	Did you Graduate?	Certificate or Degree	Course of Study
	<input type="checkbox"/> yes <input type="checkbox"/> no		
	<input type="checkbox"/> yes <input type="checkbox"/> no		
	<input type="checkbox"/> yes <input type="checkbox"/> no		
	<input type="checkbox"/> yes <input type="checkbox"/> no		

Do you qualify for any employment programs?  Yes  No If yes, which one(s) \_\_\_\_\_

Have you served in the Armed Forces?  Yes  No Describe duties and/or training you completed which pertains to this position:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**This employer will not discriminate against or harass any employee or applicant for employment because of race, color, creed, religion, national origin, sex, sexual orientation, disability, age, marital status, or status with regard to public assistance.**

List employment history, beginning with current employer. Do not provide dates of employment for jobs held more than five years ago. Additional copies of this page is acceptable.

Company _____ Address: _____ City: _____ ST _____ ZIP _____ Phone: _____ Position Title: _____ Supervisor's name: _____ Supervisor's Title: _____ <p style="text-align: center;"><b>Major Responsibilities</b></p> _____ _____ _____ _____ _____	Length of employment <i>(if within last 5 years)</i> From _____ Month Year To _____ Month Year Total _____ Month Year Wage: Start _____ End _____ Reason for leaving: _____ _____ _____
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Are you willing to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	What shift would you prefer? (If applicable) 1st _____ 2nd _____ 3rd _____	Are you willing to work other shifts? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what shifts? 1st _____ 2nd _____ 3rd _____
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**Job Relevant Volunteer and Un paid Work Experience**

Type of Volunteer Activity	Major Responsibilities	No. of Hrs/Wk	Length of Service

Describe any additional experience or training that qualifies you for this job: \_\_\_\_\_  
 \_\_\_\_\_

**List three people other than relatives, who can be contacted regarding your qualifications, work habits and character.**

Name	Current Address	Phone	Position & work relationship

Have you been convicted of a felony?  Yes  No. If "Yes", please attach a separate sheet with explanation. (Information concerning this question will not be used to automatically bar you from employment but may be used to direct your interests to areas less related to your conviction.)

**Please read the following information carefully**

\*\* In accordance with the Immigration Reform and Control Act of 1986, this employer hires only U.S. citizens and lawfully authorized alien workers. If hired, you will be required to provide written documentation of citizenship or legalized alien program. Failure to provide said documentation will result in dismissal.  
 \*\* Minn. Stat. 518.611, Subd.8, requires employers to obtain information from all new employees regarding court-ordered child support obligations that are required by law to be withheld from income. Failure to provide said documentation will result in dismissal.

If you are hired for this position, you may be required to undergo a physical examination and/or drug screening and/or background check at this employer's expense to determine whether or not you are able to perform the duties of this position in an effective and safe manner, and whether or not accommodations need to be made for you.  
 This employer is an EQUAL OPPORTUNITY EMPLOYER and encourages application from women, minorities and disabled persons. This employer does not discriminate on the basis of disability status in the admission or access to or treatment of employment in its programs or activities. It is the policy of this employer to provide reasonable accommodations to the know physical and mental limitations of qualified disability applicants and employees in order for them to perform the essential functions of the job in question.

**APPLICANT CERTIFICATION**

***This employer has the right to verify information provided in this application. False information may be grounds for rejecting this application or for dismissal following employment.***

1. I have read and understand the job announcement for which I am applying and certify that the answers given in the application are true and complete to the best of my knowledge.
2. I understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that, if employed by this employer, my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason.
3. I certify that I am able to perform the duties described in the position posting.

I authorize this employer and any agent acting on it's behalf to conduct an inquiry into any job-related information contained in this application, including but not limited to, my records maintained by an educational institution relating to academic and attendance performance, i.e., transcripts. Moreover, I hereby release the employer and any agent acting on it's behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.

Yes  Yes, but not present employer until job is offered.  No. (We may be unable to hire you without this information.)

Date: \_\_\_\_\_ Signature (Do not print): \_\_\_\_\_