



# Application for Employment

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Personal Information

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

Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

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

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Do you live at this address year round? Yes No      Are you 18 years of age? Yes No      Are you legally able to work in the United States? Yes No

Referred by: \_\_\_\_\_

## Employment Desired

**Position:** \_\_\_\_\_

**Wage desired:** \_\_\_\_\_

**Available start date:** \_\_\_\_\_

**Locations interested in working:** Blaine      Burnsville      Champlin

Are you currently employed? Yes No      Ever applied to this company before? Yes No

If so, may we inquired of your present employer? Yes No      If so, when: \_\_\_\_\_

## Education

Education	Name & Location	Area of studies?	Years attended?	Did you graduate?
High School				
College				
Trade, Business or Correspondence School				

Other training, certifications or licenses: \_\_\_\_\_

Are you currently attending school? Yes No      If so full time or part time? Full Time Part Time

## Availability

Please fill out times you are able to work:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>Days</b> (10 AM-5 PM)							
<b>Nights</b> (5 PM-3 AM)							

If you are unable to work a particular time please mark with an "X".      *Your availability will be used to determine eligabilty for positions*

Preferred number of shifts per week: \_\_\_\_\_

Preferred hours per week: \_\_\_\_\_

 **General Information**

Subjects of special study,  
research work or special skills:


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Activities: (civic, athletic, school, etc)


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*Exclude organizations, the name of which indicated the race, creed, age, marital status, color or nation of its members*

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 **Employment History** (Please list your last 3 employers, starting with most recent job first)

<b>Employer:</b>	<b>Position:</b>	<b>Wage:</b>
<b>Dates of Employment:</b> _____ to: _____	<b>Responsibilities:</b> _____	
<b>Address:</b>	<b>Phone:</b> _____	
Street _____		
City _____ State _____ Zip _____	<b>Supervisor Name &amp; Title:</b> _____	
<b>Reason for leaving:</b>	<b>May we contact them?</b>	<b>Yes    No</b>
<b>Employer:</b>	<b>Position:</b>	<b>Wage:</b>
<b>Dates of Employment:</b> _____ to: _____	<b>Responsibilities:</b> _____	
<b>Address:</b>	<b>Phone:</b> _____	
Street _____		
City _____ State _____ Zip _____	<b>Supervisor Name &amp; Title:</b> _____	
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<b>Employer:</b>	<b>Position:</b>	<b>Wage:</b>
<b>Dates of Employment:</b> _____ to: _____	<b>Responsibilities:</b> _____	
<b>Address:</b>	<b>Phone:</b> _____	
Street _____		
City _____ State _____ Zip _____	<b>Supervisor Name &amp; Title:</b> _____	
<b>Reason for leaving:</b>	<b>May we contact them?</b>	<b>Yes    No</b>

 **References** (Give the names of 3 persons not related to you whom you have know at least one year)

Name	Address	Phone	Business/Relationship	Years Acquainted

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than the president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_