## A picture containing drawing Description automatically generatedEmployment Application

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | Date: | | | |  | | | | |
| Last | | | | | | | | | | | | | | | | | | | First | | | | | | | | | | | | | | | | | M.I. | | | | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| Street Address | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | |
| City | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | State | | | | | | | ZIP Code | | | | | |
| Phone: | (     ) | | | | | | | | | | | | | | | | | | | | | E-mail Address: | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Date Available: | | | | | |  | | | | | | | | Social Security No.: | | | | | | | |  | | | | | | | | | | | | | Desired Salary: | | | | | | | $ | | | | | | |
| Position Applied for: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a citizen of the United States? | | | | | | | | | | | | | | | | | YES | | | | NO | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | | | | | | | | | | | | | | YES | NO |
| Have you ever worked for this company? | | | | | | | | | | | | | | | | | YES | | | | NO | | If yes, when? | | | | | | | | |  | | | | | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | | | | | | | | | YES | | | | NO | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| If yes, explain: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Education – Please offer information if not included on attached resume | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School: | | | | |  | | | | | | | | | | | | | | | Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | To: | | | |  | | | | Did you graduate? | | | | | | | | | | YES | | NO | | | | | | Degree: | | | | |  | | | | | | | | | |
| College: | | | |  | | | | | | | | | | | | | | | | Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | To: | | | |  | | | | Did you graduate? | | | | | | | | | | YES | | NO | | | | | | Degree: | | | | |  | | | | | | | | | |
| Other: |  | | | | | | | | | | | | | | | | | | | Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | To: | | | |  | | | | Did you graduate? | | | | | | | | | | YES | | NO | | | | | | Degree: | | | | |  | | | | | | | | | |
| References – Please offer information if not included on attached resume | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list three professional references. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | |  | | | | | | | | | | | | | | | | | | | | Relationship: | | | | | |  | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | (     ) | | | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | |  | | | | | | | | | | | | | | | | | | | | Relationship: | | | | | |  | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | (     ) | | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | |  | | | | | | | | | | | | | | | | | | | | Relationship: | | | | | |  | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | (     ) | | | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous Employment – Please offer information if not included on attached resume | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | | (     ) | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | | |  | | | | | | | | | | |
| Job Title: | | | |  | | | | | | | | | | | | | | Starting Salary: | | | | | | | | | $ | | | | | | | | | | Ending Salary: | | | | | | | | | $ | | |
| Responsibilities: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | | | To: | |  | | | | Reason for Leaving: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | NO | | | | | | |  | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | | (     ) | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | | |  | | | | | | | | | | |
| Job Title: | | | |  | | | | | | | | | | | | | | Starting Salary: | | | | | | | | | $ | | | | | | | | | | Ending Salary: | | | | | | | | | $ | | |
| Responsibilities: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | | | To: | |  | | | | Reason for Leaving: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | NO | | | | | | |  | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | | (     ) | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | | |  | | | | | | | | | | |
| Job Title: | | | |  | | | | | | | | | | | | | | Starting Salary: | | | | | | | | | $ | | | | | | | | | | Ending Salary: | | | | | | | | | $ | | |
| Responsibilities: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | | | To: | |  | | | | Reason for Leaving: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | NO | | | | | | |  | | | | | | | | | | | | | |
| Military Service | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Branch: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | From: | | | | |  | | | | | | To: | | |  | | | |
| Rank at Discharge: | | | | | | | | | |  | | | | | | | | | | | | | | | Type of Discharge: | | | | | | | | | | |  | | | | | | | | | | | | |
| If other than honorable, explain: | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Disclaimer and Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge. I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to Region Five Development Commission for the purpose of employment with this agency.  The expiration of this authorization shall be for a period no longer than one year from the date of my signature.If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date: | | |  | | | | | | | |