

Po Box 458
Buckman, MN 56317
320-468-6433



Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____
If under 18, please list age _____

Position Applied for: _____ Desired Salary: \$ _____

How many hours can you work weekly? _____ Can you work nights? _____

Employment desired? _____ Full Time Only _____ Part Time Only _____ Full or Part Time

Days/Hours Available to work- No Pref _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____

Please list Computer Experience/Operating Knowledge or any additional information necessary to describe your full qualifications for the specific position for which you are applying. Please attach additional sheets if necessary.

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 crime? YES NO If yes please explain: _____

Do you have a drivers license? _____ Yes _____ No Driver's License number _____

State of Issue _____ Expiration Date _____ Operator _____ Commercial (CDL) _____ Chauffeur

Have you had any accidents during the past three years? _____ How many? _____
Have you had any moving violations during the past three years? _____ How many? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Please list your work experience for the past five years beginning with your most recent job held
Attach additional sheets if necessary

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

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

Disclaimer and Signature

Did you complete this application yourself? ___ Yes ___ No If no who did? _____

*I certify that my answers are true and complete to the best of my knowledge.
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: _____