Application for Employment Rolette County, PO Box 939, Rolla ND 58367 An Equal Opportunity and At-Will Employer

Personal Information

Name			SSN				
Last	First	First MI					
Present Address							
Addres	s/Box		City		State		Zip Code
Telephone #	Me	essage #		Dri	river's License Yes No Class		Class
				Dr	ivers License #	<u></u>	
In case of emergency notify	/						
	Name			Phone #		Re	elationship
General Information							_
Position Applying for (be specific):		Date you can start:		Salary or wag		expected:	
						•	
Check if you a	e willing to accept	•	Have you	ever been employe	d with us before	? Yes No	
Full Time	Permanent		If yes, give dates:			_	
Part Time	Temporary						
Have you ever been convicted of a felo	ony within the last 7 year	rs? Yes No	If Yes. Pleas	e explain			
Thave you ever been convicted of a felic	ing within the last 7 year	105 110	11 1 05, 1 1045	Скрин			
Education/Tusining							
Education/Training	T			T			
Institution		Course of Stud		Indicate Year]	Degree, Dip	oloma, Certificate,
				Completed			
					1		
Other courses/classes/train	ning which may	be pertinent	to this p	osition	L		
	mig willen maj	o permioni	te time p	obliton			
Vatarana Onlan II	1	1	· 10		0 37 31		
Veterans Only: Have you e							
Are you claiming Veteran's Pro Dates of Service: From:	To:	O (II "Yes", you	must Turnish	the DD214 Report of	of Separation for	m)	
Have you ever been discharged		, wice under oth	er than ho	norable conditio	one? Vec N	Jo If "Ves"	Please specify
Thave you ever been discharged	from the armed ser	vice under ou	ici man no	norable conditie	nis. Tes i	10, 11 103,	r lease specify
Special skills/abilities/cer	tificates/license(s	s)/equipmer	ıt/softwa	re operated:			
		o), equipiner	ia bolevi a	operates.			
References: Please list below three	work related reference	s who have kno	wledge of v	your qualifications	s skills and abi	ilities to perfor	m this position
Name		Address			, 5 6 401		hone #
- :	1					1 - 1 - 1 - 1	
					1		

are you presently emple	oyed? Yes No	If yes, may we contact your previous employer? Yes No					
Please con	plete the work history	section starting with your pres	ent or most recent job				
Employer		Address, City, State					
ob Title		Telephone #	Hours worked per week				
List specific tasks completed on the job		Machines/Equipment you have operated					
Date Started:	Date Ended:	Wage	Reason for Leaving				
		\$ per					
mployer	<u> </u>	Address, City, State					
ob Title		Telephone #	Hours worked per week				
List specific tasks completed on the job		Machines/Equipment you have operated					
Oate Started:	Date Ended:	Wage \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	Reason for Leaving				
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mployer		Address, City, State					
Job Title		Telephone #	Hours worked per week				
ist specific tasks completed on t	he job	Machines/Equipment you have ope	erated				
Date Started:	Date Ended:	Wage \$ per	Reason for Leaving				
ease summarize any other	work history or qualifications	s you may have or attach resume, cover	letter or other supporting documen				

Signature of Applicant

Date