

# EMPLOYMENT APPLICATION

PLEASE PRINT LEGIBLY



Grand Forks  
701-757-3000



Grand Forks  
701-780-8462

## GENERAL INFORMATION

How Did You Learn About Us?

Employee Referral  Government Agency  College Recruitment  Advertisement - Posting  Walk - In  Customer  Other

List any friends or relatives working with us now:

## PERSONAL DATA

<b>1</b>	Name (Last, First, Middle)				<b>2</b>	Social Security Number		
<b>3</b>	Present Address	Apt / Box No.	County	City	State	Zip Code		
<b>4</b>	Area Code - Phone No.	<b>5</b>	Area Code - Phone Numbers					
<b>6</b>	By what other name or names have you been known?							
<b>7</b>	Have you been convicted of a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list all convictions, including violations of motor vehicle laws or ordinances (excluding parking):  _____							
Information supplied on conviction record will not necessarily bar applicant from consideration for employment. However, the omission or falsification of this information can result in immediate termination of employment.								
<b>8</b>	Are you authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			<b>MICHIGAN APPLICANTS ONLY</b> Are you at least 18 of years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No				

## EMPLOYMENT INTEREST

Position Desired (check one) <input type="checkbox"/> Assistant Manager <input type="checkbox"/> Customer Service Representative <input type="checkbox"/> Technician				Minimum Required Salary			Date Available		
AVAILABILITY: <input type="checkbox"/> Regular Full-time <input type="checkbox"/> Part-time		Hours Available	SUN	MON	TUES	WED	THURS	FRI	SAT
		From:							
Total hours available per week: _____		To:							

## EDUCATION

HIGH SCHOOL

CIRCLE HIGHEST GRADE COMPLETED: 9 10 11 12 GED?  Yes  No

TYPE	NAME OF SCHOOL	CITY, STATE	MAJOR SUBJECT	HOW MANY YEARS?	NOW ENROLLED?	DID YOU GRADUATE?
HIGH SCHOOL / VOCATIONAL						
COLLEGE						
OTHER						

## SPECIALIZED TRAINING

Business or Trade Schools, correspondence courses, etc. Include Military service training courses.

NAME OF SCHOOL AND LOCATION	TYPE OF TRAINING	DIPLOMA OR CERTIFICATE

## FOR OFFICE USE ONLY

Service Center Location: Region \_\_\_\_\_ Store \_\_\_\_\_ Employee Number: \_\_\_\_\_  New Hire  Rehire

We are an Equal Opportunity Employer

**EMPLOYMENT AND BUSINESS EXPERIENCE (must be completed even if resume is attached)****List most recent employer first. Include Military service and significant summer work.**

From	To	Employer	Area Code - Phone No.
Job Title		Address	
Supervisor's Name	Summarize the nature of work performed and job responsibilities		Hours per week
Reason for leaving <input type="checkbox"/> Resigned <input type="checkbox"/> Laid Off <input type="checkbox"/> Discharged		Hourly Rate/Salary Starting \$ _____ per ____ Ending \$ _____ per ____	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
From	To	Employer	Area Code - Phone No.
Job Title		Address	
Supervisor's Name	Summarize the nature of work performed and job responsibilities		Hours per week
Reason for leaving <input type="checkbox"/> Resigned <input type="checkbox"/> Laid Off <input type="checkbox"/> Discharged		Hourly Rate/Salary Starting \$ _____ per ____ Ending \$ _____ per ____	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
From	To	Employer	Area Code - Phone No.
Job Title		Address	
Supervisor's Name	Summarize the nature of work performed and job responsibilities		Hours per week
Reason for leaving <input type="checkbox"/> Resigned <input type="checkbox"/> Laid Off <input type="checkbox"/> Discharged		Hourly Rate/Salary Starting \$ _____ per ____ Ending \$ _____ per ____	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Please explain any gaps in employment			

**PERSONAL REFERENCES (not employed by this company)**

Name	Address	Area Code - Phone No.
Name	Address	Area Code - Phone No.

**ACKNOWLEDGMENTS**

I certify that all statements I have made in this application are true and agree that any misrepresentation or omission of facts requested may be sufficient cause for cancellation of my application or immediate dismissal from the Company if I have been employed. In the event I am employed, I agree to conform to the rules and policies of the Company. I understand that these rules and policies may be changed, interpreted, withdrawn, or added to at the Company's option at any time without notice.

I acknowledge the Company's notification to me that it may conduct a background investigation on me. I understand and agree that successful completion to the Company's satisfaction of such investigation(s) is required for employment or continued employment. I have authorized the company to contact any individual, educational institution or employer listed as a reference or otherwise identified on this application to inquire about both my general character and my qualifications for the position I am seeking.

In consideration of my employment or being considered for employment, I understand that any offer of employment or, once hired, my employment itself may be terminated, with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I acknowledge that I do not have any contractual rights of continuing employment with the company unless such rights are made part of a written agreement executed by me and by a Vice President or higher level officer of the Company.

With respect to the previous paragraph, I agree that the Company's liability to me for wages is limited to the amount earned by me as of the date of such termination. I also authorize the Company to deduct at any time any monies owed by me to the Company whenever such deduction is not prohibited by law.

I understand that federal law prohibits the employment of unauthorized aliens and that all persons hired must submit satisfactory proof of employment authorization and identity generally within three days of being hired. I further understand that the failure to submit such proof within the required time will result in my immediate dismissal from the Company if I have already begun my employment.

I understand that my disclosure of prior convictions for criminal or traffic offenses will not necessarily prevent my employment with the Company; however, the omission of this requested information will be sufficient cause for cancellation of my application or my immediate dismissal from the Company.

**BY SIGNING BELOW, I AGREE THAT I HAVE READ AND ACCEPT THE ABOVE ACKNOWLEDGMENTS.**

Applicant's Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

*This application for employment shall be considered active for a period of time not to exceed 30 days. At the conclusion of this time, if I have heard from the Employer and still wish to be considered for employment, it will be necessary to fill out a new application.*