APPLICATION FOR EMPLOYMENT

Please complete the application form as thoroughly as possible. Do not mark your application "see resume." Resumes may be included, but will not be accepted in lieu of a completed application form. The information provided in the form will be used to assess your qualifications for the position. Applications and supporting documents must be received by the deadline date on the job posting.

Applicant Information-Please Print			
Position Applied For:		Date of Application:	

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

Address: _____
Street Address *Apt/Unit #*

_____
City *State* *Zip Code*

Phone: (___) _____ Best time to call: _____

Cell: (___) _____ Best time to call: _____

Email Address: _____

Referral Source: ☐ Advertisement ☐ Employee ☐ Relative ☐ Walk– in

☐ Other/Name of Source: _____

Have you been employed by us before? ☐ Yes ☐ No

If Yes, When? _____

Have you ever filed an application with us before? ☐ Yes ☐ No

If Yes, when? _____

Date available for work: _____ Type of employment desired: ☐ Full-Time ☐ Part-Time ☐ Temporary

Are you currently employed? ☐ Yes ☐ No

Are you on lay-off and subject to recall? ☐ Yes ☐ No

Will you travel if job requires it? ☐ Yes ☐ No

Do you possess a valid Minnesota Drivers License? ☐ Yes ☐ No

If you are under 18, are you eligible to work? ☐ Yes ☐ No

Are you legally eligible for employment in this country? ☐ Yes ☐ No
(Proof of Citizenship or immigration status will be required upon employment)

An Equal Opportunity Employer/ADA

It is the policy of Prairie Five to provide equal employment opportunity for all, without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, disability, sexual orientation, gender identity, age, genetic disposition or status with regard to public assistance.

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section below. You may exclude organizations which indicate race, color, creed, religion, national origin, sex, age, disability, sexual orientation, marital status or other protected status.

Employment History

Employer:		Phone:
Address:		Immediate Supervisor and Title:
Job Title:		
Summarize the nature of the work performed and		
Dates Employed From:	To:	Reason for leaving:
May we contact for reference? ☐ Yes ☐ No ☐ Later		
Employer:		Phone:
Address:		Immediate Supervisor and Title:
Job Title:		
Summarize the nature of the work performed and job responsibilities:		
Dates Employed From:	To:	Reason for leaving:
May we contact for reference? ☐ Yes ☐ No ☐ Later		
Employer:		Phone:
Address:		Immediate Supervisor and Title:
Job Title:		
Summarize the nature of the work performed and job responsibilities:		
Dates Employed From:	To:	Reason for leaving:
May we contact for reference? ☐ Yes ☐ No ☐ Later		
Employer:		Phone:
Address:		Immediate Supervisor and Title:
Job Title:		
Summarize the nature of the work performed and job responsibilities:		
Dates Employed From:	To:	Reason for leaving:
May we contact for reference? ☐ Yes ☐ No ☐ Later		

Comments: (including explanation of any gaps in employment)	
Skills and Qualifications: Summarize any special training, skills, licenses, certificates and/ or characteristics of yourself that may qualify you as being able to perform job-related functions for the position which you are applying.	

Educational Background												
	High School				Undergraduate College/University				Technical/ Graduate/ Professional			
School Name and Location												
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/GED/Degree												
Describe Course of Study												
Describe any skills, special training, apprentice, and extra curricular activities that relate to the position for which you are applying.												
Describe any honors you have received.												

List professional, trade, business, or civic associations and any offices held. (You may exclude memberships which would reveal, sex, race, age, religion, national origin, color, disability or other.)

Organization	**Offices Held**

List special accomplishments, publications, awards. (You may exclude memberships which would reveal, sex, race, religion, age, national origin, color, disability or other.)

List any additional information you would like us to consider:

References

List name and phone number of three (3) business/work references who are NOT related to you. If not applicable, list three (3) school or personal references who are not related to you.

Name	Phone Number	Years Known
	( )	
	( )	
	( )	

Disclaimer and Signature

- It is understood and agreed upon that any misrepresentation by me on this application or in my interview will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.
- **I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.**
- I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause.
- This application is current for one (1) year. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.
- The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

Signature: _____ **Date**: _____

AFFIRMATIVE ACTION VOLUNTARY INFORMATION

Completion of information below is voluntary

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

To be completed by applicant. Not for interview purposes. To be filed separately from application. This information is used to satisfy the Affirmative Action requirements of Section 503 of the Rehabilitation Act or as necessitated by another federal law or regulation.

As required, we comply with government regulations including Affirmative Action obligations where they apply.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated.

Please be advised that this survey is NOT a part of your official application for employment. It is considered confidential information that will not be used in any hiring decision.

Position(s) applied for: Date:

Referral Source:

☐ Walk-In ☐ Employee ☐ Relative

☐ Advertisement-Source_____ ☐ Other _____

Name of person who referred you (if applicable): _____

Applicant Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apt/Unit #

_____
City State Zip Code

Phone: (_____)_____ ☐ MALE ☐ FEMALE

Please check on of the following Equal Employment Opportunity Identification Groups:

☐ White
☐ Black (not of Hispanic origin)
☐ American Indian/Alaskan Native
☐ Hispanic
☐ Asian/Pacific Islander

Special Notice

To Vietnam Era Veterans, Disabled Veterans and Individuals with physical or mental disabilities:

Government contractors subject to the Vietnam Era Veterans Readjustment Act of 1974 and the Rehabilitation Act of 1973 are required to take affirmative action to employ and advance in employment qualified disabled veterans, veterans of the Vietnam era and qualified handicapped individuals.

You are invited to volunteer this information, if you qualify, to assist in proper placement and determining reasonable accommodation. This information will be considered confidential. Refusal to provide this information will not adversely affect your consideration for employment.

☐ Vietnam era Veteran (served between 1964-1975) ☐ Disabled Veteran ☐ Individual with a Disability