SHERIDAN COUNTY APPLICATION FOR EMPLOYMENT

PO Box 439 McClusky ND 58463 (701) 363-2205

 Follow instructions carefully Provide detail - do not use "see resu If accommodation or assistance is no 	Print or type Check for errors before submitting is application, contact the employing agency.								
Position(s) applying for:									
General Information									
Name (Last, First, Middle Initial)					Work Telephone No.				
Mailing Address	City		State	Zip Code	Home Telephone No.				
Can you provide proof, if hired, that you are eligible to work in the United States?									
Have you ever been convicted of a crime other than a minor traffic violation? If yes, please explain (Convictions are not an absolute bar to employment but will be considered in relationship to the job requirements.)									
How did you learn about this opening?									
Veteran's Preference									
Do you claim Veteran's Preference?									
Do you claim Disabled Veteran's Preference?									
Veteran Eligibility: You must be a ND resident and have served in the active military forces during a period of war or received the armed forces expeditionary or other campaign service medal during an emergency condition, and must have been released under other than dishonorable conditions. See NDCC 37-19.1.									
Education and/or Training									
Did you graduate from high school or receive a GED Certificate?									
SCHOOL NAME AND LOCATION		Credits	Field		Did you	Diploma or degree			
(college, business, nursing, vocational, or other)	Qtr.	Sem.	Major	Minor	graduate?	earned			
					☐ Yes ☐ No				
					☐ Yes ☐ No				
					☐ Yes ☐ No				
Other education/training/skills:	· ·	1							
Computer skills (hardware & software):									
Current professional license/certificate/registration:									
Related volunteer experience:									

Employment History:

- Start with your current or last job include armed forces service and self-employment.
- Any change of job title under the same employer should be considered a separate position.
- ATTACH EXTRA SHEETS using the same format if you have additional employment history.

May we contact your current employer for a reference?			☐ Yes	☐ No	☐ Not Applicable		
Employer			Telephone No.		Supervisor's Na	ame	
Type of Business		Address					
Your Job Title Dates E From:			Employed (indicate months & years) To:			Average Hours Worked Per Week	
Duties:							
Monthly Salary	Reason for Leaving						
Employer			Telephone No.		Supervisor's Na	ame	
Type of Business		Address					
Your Job Title	Date Fron		mployed (indicate n	months & yea	ars)	Average Hours Worked Per Week	
Duties: Monthly Salary	Reason for Leaving						
MOHUTIY Salary	Reason for Leaving						
Employer			Telephone No.		Supervisor's Na	ame	
Type of Business		Address	1				
Your Job Title	Title Dates E From:		Employed (indicate months & years) To:			Average Hours Worked Per Week	
Duties:							
Monthly Salary	Reason for Leaving						
I certify that all information contained in this application and any attachments are true and complete to the best of my knowledge. I understand that any willful misrepresentation, false statement, or omission by me in the application or interview process will be cause for rejection of my application or termination of my employment. I authorize investigation of all statements made on this application and any attachments, and I release all persons, companies, and organizations from liability for providing or receiving such information. I further understand that this employment application and other employment related documents are not contracts of employment; and, that any oral or written statements to the contrary are hereby expressly disavowed. Applicant's Signature							

All information provided is subject to the North Dakota Open Records Law