MERCER COUNTY APPLICATION FOR EMPLOYMENT

PO Box 39 Stanton ND 58571 (701) 745-3292

 Follow instructions carefully Provide detail - do not use "see resume" If accommodation or assistance is needed in completing this application, contact the employing agency. 										
Position(s) applying for:										
General Information				1						
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?										
How did you learn about this opening?										
Veteran's Preference										
Veteran	☐ No	Yes - N	<i>lust</i> attach D	D-214, Report of	Separation					
Disabled Veteran	☐ No	Yes - <i>Must</i> attach DD-214, Report of Separation, & a letter less than one year old from the Veteran's Administration indicating disability Yes - <i>Must</i> attach DD-214, Report of Separation, & a letter less than one year old from the Veteran's Administration indicating disability								
Spouse of Disabled Veteran	□No									
Spouse of Deceased Veteran	□No									
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 (college, business, nursing, vocational, or other)	No. of	Credits	Field		Did you	Diploma or				
	Qtr.	Sem.	Major	Minor	graduate?	degree earned				
					☐ Yes ☐ No					
					☐ Yes ☐ No					
					☐ Yes ☐ No					
Other education/training/skills:	I	I I								
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 N	lame		
Type of Business		Address	·					
Your Job Title		Dates Employed (indicate months & years) From: To:			ars)	Average Hours Worked Per Week		
Duties:		1						
Monthly Salary	Reason for Leaving							
Employer			Telephone No.		Supervisor's N	lame		
Type of Business		Address	5		•			
Your Job Title		Dates E From:	ates Employed (indicate months & years) om: To:		ars)	Average Hours Worked Per Week		
Duties: Monthly Salary	Reason for Leaving							
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Duties:			_					
Monthly Salary	Reason for Leaving							
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I certify that all information understand that any willful r for rejection of my application any attachments, and I relefurther understand that this that any oral or written state	misrepresentation, false on or termination of my e ease all persons, compa employment applicatior	statement employment anies, and and other	nt, or omission by rent. I authorize inve organizations from organizations from er employment rela	ne in the apperstigation of a milability for ated docume and.	plication or inter all statements m r providing or re	rview process will be cause hade on this application and eceiving such information. I		
Applicant's Signature				Date				

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