

District Office 1640 Highway 2, Suite 200 Two Harbors, MN 55616-4017 Ph.: 218-834-8201 www.isd381.org

APPLICATION FOR EMPLOYMENT PRE-EMPLOYMENT QUESTIONAIRE - AN EQUAL OPPORTUNITY EMPLOYER

NAME			DATE		
FIRST	MI	LAST			
PRESENT ADD	RESS				
	STREET	CITY	STATE ZIP		
PERMANENT A					
	STREET		STATE ZIP		
PHONE NO		CELL PI	HONE		
EMAIL ADDRE	SS	ARE YOU 18 Y	YEARS OR OLDER		
ARE YOU PREVENTED	FROM LAWFULLY BECOM	ING EMPLOYED IN THIS COUNTRY	BECAUSE OF VISA OR IMMIGRATION		
STATUS?					
	~ ~				
EMPLOYMEN	T DESIRED				
POSITION		_DATE YOU CAN STAR	Γ		
ARE YOU EMPLOYED NOW?					
	EMPLOYER?				
REFERRED BY					
EDUCATION NAME & LOCATION NUMBER OF YEARS DID YOU SUBJUECTS					
			UATE STUDIED		
GRAMMER					
HIGH SCHOOL					

GENERAL SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

SPECIAL SKILLS ACTIVITIES (CIVIC, ATHLETIC, ETC)

EXCLUDE ORGANIZATION, THE NAME OF WHICH INDICATES RACE, CREED, SEX, AGE, MARTIAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS U.S. MILITARY OR NAVAL SERVICE RANK

TRADE, BUSINESS OR CORRESPONDENCE

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)					
DATE MONTH AND YEAR	NAME, ADDRESS, PHONE NUMBER OF EMPLOYER	POSITION	REASON FOR LEAVING		
FROM					
ТО					
FROM					
ТО					
FROM					
то					

WHICH OF THESE JOBS DID YOU LIKE THE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU. WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS & PHONE NUMBER	BUSINESS	YEARS ACQUAINTED

IN CASE OF EMERGENCEY NOTIFY:

NAME	ADDRESS	PHONE

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

SIGNATURE OF APPLICANT _____ DATE _____