



Proudly Serving Richland and Wilkin Counties

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APPLICATION FOR EMPLOYMENT

Today's Date : _____

Applicant's Name: _____

Present Address: _____

Phone: _____ Email: _____

Permanent Address (if different from present address): _____

Are you 18 years old or older? Yes No

Are you either a U.S. citizen or an alien authorized to work in the U.S.? Yes No

Have you ever worked or attended school under another name? Yes No

If "yes", under what name? _____

Have you ever been convicted of a crime? Yes No

If "yes", give details, including date(s): *A "yes" answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law.*

Have you ever been convicted of any violation of any federal, military, state or local laws (excluding non-criminal traffic violations)? Yes No

Have you ever had any license, certification, or right to practice denied or surrendered, or disciplined with suspension, reprimand, probation, revocation, or any other method of discipline in North Dakota or Minnesota or any other state or jurisdiction? Yes No

Are you the subject of any pending investigation, administration sanction proceeding, hearing, trial or similar action by an agency or board that has granted or denied you a license, certification, or right to practice in any regulated occupation, trade or profession in ND or MN or in any other state or jurisdiction? Yes No

Have you ever been sanctioned by the Office of Inspector General (OIG)? (Medicare, Medicaid)? Yes No

Are you 18 years old or older? Yes No

Position Desired: _____

National Registry # _____

Minnesota License # _____

North Dakota License # _____

Date you can start: _____

Hourly rate/monthly salary desired: _____

Do you prefer Full-time Part-time

If part-time, hours per week desired: _____

Hours you are available to work: _____

Day of week you are available to work: _____

Are you able to work weekends? (if required for the position of which you're applying) Yes No

Are you able to work holidays? (if required for the position of which you're applying) Yes No

Are you able to work nights? (if required for the position of which you're applying) Yes No

Are you able to work overtime? Yes No

Have you previously worked for this company? Yes No

If "yes", list start-date _____ and end-date _____

Reason for leaving: _____

Who was your former supervisor(s) at this company? _____

How did you learn about this opening? _____

High School: _____

Graduated? Yes No

Technical/College/University School: _____

Graduated? Yes No

Course of Study: _____

Other education or training: _____

Can you type? Yes - WPM? _____ No

Are you familiar with personal computers? Yes No PC MAC

What computer programs are you familiar with? _____

Military Experience Branch of Service: _____

Start-date _____ — End-date _____

Military Experience Rank at Discharge: _____

Military Experience Education and Training: _____

Please list your most recent employment: _____

Employer: _____

Employer Address: _____

Start-date _____ — End-date _____

Position Held: _____

Reason for leaving: _____

Supervisor's Name & Title: _____

May we contact? Yes No

Description of Duties: _____

AUTHORIZATION AND ACKNOWLEDGMENTS -- I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal. I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice.

Applicant Signature _____ Date: _____

Additional Comments: _____