

APPLICATION FOR EMPLOYMENT

The mission of the Garrison Public School District #51 is to provide educational opportunities and experiences which assist students in reaching their potential to become productive and responsible citizens.

Position Applying For		Date			
How did you learn of this	opening?				
PERSONAL INFORMATION	(please print)				
Last Name	First Name	M	Middle Initial		
Other name(s) you are kno	own by				
Address	City	State	Zip		
Home Phone No.	Cell Phone No.	E-mail Add	 dress	_	
Are you 18 years or older?	□No □Yes				
	nired, that you are eligible to wo				
Have you ever been convid	cted of a felony? □No □	∃Yes * <i>If yes, ple</i>	ease explain below	•	
VETERAN'S PREFERENCE					
	ust be a North Dakota resident :	and have served i	n the active milita	ry forces	
	received the armed forces expe			•	
'	dition, and must have been rele	eased under other	than dishonorabl	е	
	kota Century Code 37-19.1.				
Do you claim preference a					
Veteran		D-214, Report of S	•		
Disabled Veteran Veterans' Administration indica		D-214 & letter less tl	nan 1 yr old from		
Spouse of Disabled Vetera		onv of marriage ce	ertificate, DD-214,	& letter less	
	Iministration indicating disability	,p, 0 <u>.</u>	, , , , , , , , , , , , , , , , , , , ,	d lette.	
Spouse of Deceased Veter		py of marriage ce	ertificate, DD-214,	&	
veteran's death certificate	5				

EDUCATION OR TRAINING						
Did you graduate from high school or receive a GED certificate? □No □Yes						
College Name & City/State			o. of Fiel		Did you Graduate?	Degree or Diploma Earned
	QTR	SEM	MAJOR	MINOR		
					□No □Yes	
					□No □Yes	
					□No □Yes	
Computer skills, related	volunte	er expe	rience, and	d other ed	ucation/training/s	kills:
Are you willing to work evenings? Are you willing to work weekends? No Yes On Yes						
Are you willing to work Would you like to work	holidays	?		□No		ne
•	Would you like to work □ Full-time □ Part-time Do you have any special licensing or certification? □ No □ Yes *If yes, please explain below.					
Do You Have Experienc	e in the	Followi	ng?			
□ Recordkeeping		□ Accou	_	□ C	ash Register	
□ Personnel Manageme	el Management		s □N	☐ Microsoft Products (word, excel)		
☐ Customer Service	ervice Typing		□ Ja	□ Janitorial Service		
□ Payroll	Payroll Writing Skills		□ F	□ Food Service		
What specific attributes qualify you for this job?						
REFERENCES Give the name of three	e person	s not re	lated to y	ou and wh	om you have knov	vn for at least one year.
NAME		ADDRE	SS		PHONE #	YRS ACQUAINTED
1						
2						
3						

1.	Employer		Telephone No.	Supervisor's Name			
Tyr	l oe of Business		Address	Address			
Your Job Title		Dates Employed From: To:	Average Hours Worked per Week:				
Duf	ties:						
Mc	onthly Salary:	Reason for Le	eaving:				
2.	Employer		Telephone No.	Supervisor's Name			
Tyr	l oe of Business		Address	Address			
Your Job Title			Dates Employed From: To:	Average Hours Worked per Week:			
Dut	ties:						
Mc	onthly Salary:	Reason for Le	eaving:				
3.	Employer		Telephone No.	Supervisor's Name			
Type of Business		Address					
Your Job Title			Dates Employed From: To:	Average Hours Worked per Week:			
Dut	ties:						
Мс	onthly Salary:	Reason for Le	Reason for Leaving:				
the om ter and pro	e best of my knowledg nission by me in the ap rmination of my emplo d any attachments, ar	ge. I understand that pplication or interview oyment. I authorize in I release all personuch information. I furt	application and any attachmany willful misrepresentation with process will be cause for renvestigation of all statement as, companies, and organization that this em	on, false statement, or ejection of my application of my application ot made on this application tions from liability for			
_	oplicant's Signature		Date				