393 Dunlap Street N. Saint Paul, MN 55104 Tel: 651-486-6824 Fax 651-401-9677

**Job Application Form**

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form. **PERSONAL INFORMATION:**

First Name Middle Initial Last Name

Street Address

City: State Zip Code

Phone Number: ( )

Are you eligible to work in the United States? Yes No

If you are 18 years or older? Yes No

Have you been convicted of or pleaded no contest to a felony within the last five years? Yes No

# POSITION/AVAILABILITY:

Position Applied for Full or Part-time

Days/Hours Available

|  |  |
| --- | --- |
| **Days** | Hours |
| Monday |  |
| Tuesday |  |
| Wednesday |  |
| Thursday |  |
| Friday |  |
| Saturday |  |
| Sunday |  |

Hours Available: from to

What date are you available to start work?

# EDUCATION:

Name and Address Of School - Degree/Diploma - Graduation Date

Skills and Qualifications: Licenses, Skills, Training, Awards

# EMPLOYMENT HISTORY:

Present Or Last Position:

Employer:

Address:

Supervisor:

Phone:

Position Title:

From: To:

Responsibilities:

Salary:

Reason for Leaving:

# Previous Position:

Employer:

Address:

Supervisor:

Phone:

Position Title:

From: To:

Responsibilities:

Salary:

Reason for Leaving:

**May We Contact Your Present Employer?** Yes No

# References:

Name/Title Address Phone

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature

Date