

EDUCATION

Did you graduate from high school or receive a GED?

Yes No Name of School: _____

How many years of education have you completed: (Check one)

7 8 9 10 11 12 13 14 15 16 17 18 19 20

Name of College, University, Technical/Vocational/Business Schools	Quarter Hours Completed	Degree Received	Major	Minor

List any correspondence courses, special courses, seminars, workshops, and training that might be related to this position:

JOB RELEVANT VOLUNTEER EXPERIENCE

Volunteer Activity (Do not specify organization)	Work Performed	Number of Hours per Month

MILITARY SERVICE

Are you a veteran of the U.S. Military Service? Yes No

If yes, what branch of Service? _____

Did you serve on Active Duty for 181 consecutive days? Yes No

Did you receive an Honorable Discharge? Yes No

EMPLOYMENT HISTORY

Experience and training ratings are determined by this information; please be complete. List your present or most recent experience first. Attach additional sheets if necessary.

Employer 1: _____ Address _____ Phone Number _____ Supervisor _____ Your Title _____ Supervisor's Title _____ Number and type of positions you supervised: _____ <table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;">% of time spent in each area of responsibility</td> <td style="width: 20%; border: none;"></td> <td style="width: 55%; border: none;">Principal Responsibilities (be complete)</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> </table>	% of time spent in each area of responsibility		Principal Responsibilities (be complete)	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	LENGTH OF EMPLOYMENT From _____ <div style="text-align: center;">Month Year</div> To _____ <div style="text-align: center;">Month Year</div> Total _____ <div style="text-align: center;">Years Months</div> Hours per week _____ Last salary _____ Reason for leaving: _____ _____ May we contact your present employer? Yes No If no, explain: _____ _____
% of time spent in each area of responsibility		Principal Responsibilities (be complete)																	
_____	_____	_____																	
_____	_____	_____																	
_____	_____	_____																	
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_____	_____	_____																	

Employer 2: _____ Address _____ Phone Number _____ Supervisor _____ Your Title _____ Supervisor's Title _____ Number and type of positions you supervised: _____ <table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;">% of time spent in each area of responsibility</td> <td style="width: 20%; border: none;"></td> <td style="width: 55%; border: none;">Principal Responsibilities (be complete)</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> </table>	% of time spent in each area of responsibility		Principal Responsibilities (be complete)	_____	_____	_____	_____	_____	_____	_____	_____	_____	LENGTH OF EMPLOYMENT From _____ <div style="text-align: center;">Month Year</div> To _____ <div style="text-align: center;">Month Year</div> Total _____ <div style="text-align: center;">Years Months</div> Hours per week _____ Last salary _____ Reason for leaving _____ _____
% of time spent in each area of responsibility		Principal Responsibilities (be complete)											
_____	_____	_____											
_____	_____	_____											
_____	_____	_____											

Employer 3: _____ Address _____ Phone Number _____ Supervisor _____ Your Title _____ Supervisor's Title _____ Number and type of positions you supervised: _____ <table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;">% of time spent in each area of responsibility</td> <td style="width: 20%; border: none;"></td> <td style="width: 55%; border: none;">Principal Responsibilities (be complete)</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> </table>	% of time spent in each area of responsibility		Principal Responsibilities (be complete)	_____	_____	_____	_____	_____	_____	_____	_____	_____	LENGTH OF EMPLOYMENT From _____ <div style="text-align: center;">Month Year</div> To _____ <div style="text-align: center;">Month Year</div> Total _____ <div style="text-align: center;">Years Months</div> Hours per week _____ Last salary _____ Reason for leavin ^a _____ _____
% of time spent in each area of responsibility		Principal Responsibilities (be complete)											
_____	_____	_____											
_____	_____	_____											
_____	_____	_____											

CLERICAL APPLICANTS ONLY:

Typing Speed: _____ WPM

Word Processing/ Computer Experience:

Number of Years: _____ Specify Programs: _____

Describe any additional experience or skills, which qualify you for this job.

Have you ever been convicted as an adult of a felony, gross misdemeanor or misdemeanor crime for which a jail sentence may be imposed which has not been annulled, expunged, or sealed by a court?

Yes No If yes, describe in full, including disposition of offense.

You may answer "NO" to this question if the conviction or criminal records thereof have been annulled, expunged, sealed, set aside or purged, or if you have been pardoned pursuant to law. Before any applicant is rejected on the basis of a criminal conviction, he or she will be notified in writing and will be given any rights to processing of complaints or grievances afforded by Minnesota Statutes Chapter 364.

IMPORTANT FACTS FOR YOU TO KNOW CONCERNING YOUR APPLICATION

Any information about yourself that you provide to the LMCD during the application process will be used to identify you as an applicant and to assess your qualifications for employment with the LMCD. If you wish to be considered for employment, you are required to provide the information requested in the Application for Employment. Your refusal to supply information requested by the LMCD may mean that your application will not be considered for employment. If you are employed, individuals in the LMCD who need information from your application will have access to it. This data will also be provided to persons authorized to have access under State or Federal law; persons authorized by court order to have access to the information; and persons to whom you consent in writing to have access to the information.

Materials submitted in support of an application are normally not returned. You should not submit an original document if it is your only copy.

I authorize investigation of all statements contained in this application for employment as may be necessary to arrive at an employment decision. I certify that all answers to the above questions are true and understand that any false information on or omission of information from this application will be cause for rejection of this application or termination of employment without notice or benefits.

Applicant's Signature

Date