



Minnesota Counties Information Systems

413 SE 7th Avenue, Grand Rapids, MN 55744
 Phone 218-326-0381 Fax 218-326-3544

Application for Employment

Application for Employment			
Title of Specific Position for Which You Are Applying		Date of Application	Date Available for Work
Last Name	First Name	Middle Initial	County of Residence
Mailing Address	City State		Zip
Residence Phone Number	Business Phone Number	Fax Number	E-mail Address
Best Time to Contact You? At Residence: At Business:	Are you 18 years of age or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, state Date of Birth: _____	Education: Did you graduate from high school or receive a GED?? <input type="checkbox"/> Yes <input type="checkbox"/> No School Attended _____ How many years of education have you had? (Circle one)	
VETERAN STATUS Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to claim Veterans' Preference points? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you wish to claim Veterans' Preference points? <input type="checkbox"/> Yes <input type="checkbox"/> No If you are a disabled veteran and wish to claim additional points, please check here. <input type="checkbox"/> Yes <input type="checkbox"/> No Proof of applicable military status/eligibility, such as a DD214 form, will be required in order to claim credits. Please attach DD214 form or forward it within five (5) business days.			
PRIOR EMPLOYMENT Have you ever been discharged or forced to resign from prior employment, other than in relation to a human rights charge or lawsuit in which you were the claimant/plaintiff? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, identify the employer and describe the circumstances: _____ _____ _____			
Important Facts About Information On Your Application This application is to assist in the hiring process. Certain information requested on the application is not public. It will be released only to you or to persons within the organization who need to know it in order to perform their job duties. If you are hired, the data will be available to the Internal Revenue Service and the Social Security Administration for payroll and tax purposes.			
Private Data	Why we ask for it	Are you legally obligated to provide it?	What may happen if you don't provide it?
Date of Birth (If under 18)	To comply with child labor laws.	Only if you are under age 18.	Failure to provide information may be cause for rejecting an applicant.
Mailing Address	To be able to send you notices.	Yes	Failure to provide information may be cause for rejecting an applicant.
Residence Phone Number Business Phone Number Fax Number E-Mail Address	To be able to contact you to determine availability for an interview.	No	We might not be able to contact you for an interview.
Veteran Information	To determine if you are eligible for and if you desire Veterans' Preference. To determine whether we may legally accept an application from you and to determine whether your record may be a job-related consideration.	No	We will not be able to award Veterans' Preference points in our rating process.
Conviction Record		Yes	We will not be able to make determinations required by law.



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List all employment history (most recent first).
If you need more than three entries, copy this page.

Position Title: _____
Employing Firm: _____
Address: _____
Phone Number: _____
Supervisor Name: _____
Supervisor Title: _____

Principal Responsibilities: _____

Length of employment:
From _____ To _____
Month / Year Month / Year

Reason for leaving: _____

May we contact your present employer?
 Yes No

If no, explain: _____

Position Title: _____
Employing Firm: _____
Address: _____
Phone Number: _____
Supervisor Name: _____
Supervisor Title: _____

Principal Responsibilities: _____

Length of employment:
From _____ To _____
Month / Year Month / Year

Reason for leaving: _____

Position Title: _____
Employing Firm: _____
Address: _____
Phone Number: _____
Supervisor Name: _____
Supervisor Title: _____

Principal Responsibilities: _____

Length of employment:
From _____ To _____
Month / Year Month / Year

Reason for leaving: _____



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Name and Location of College, University, Technical Schools	Did You Graduate?	Certificate or Degree	Course of Study
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Job Relevant Volunteer and Unpaid Work Experience

Kind of Volunteer Activity (Do not specify organization)	Major Responsibilities	Number of Hours /Week	Length of Service

Describe any additional experience or training, including governmental experience that qualifies you for this job:

Give us the names of three people, other than relatives, who can be contacted regarding your qualifications, work habits, and character.

Name	Current Address	Position / Relation to Your Work	Phone/E-mail
			Home: Work: E-mail:
			Home: Work: E-mail:
	Á	Á	Home Á Á Work: E-mail:

