City of Glen Ullin
PO Box 70
Glen Ullin, ND 58631
(701) 348-3683

## **Employment Application**

		Applicar	t Informat	ion						
Full Name:							Date:			
Address:	Last First				М.	I.				
Address.	Street Address				Apartment/Unit #					
	City				Sta	ate	ZIP Code			
Phone: (	)	E-	mail Addres	s:						
Date Available: Social		I Security No.:			Desired Salary: \$					
Position App	olied for:		vers Licens		YES	NO	Class of Lice			
Are you a ci	tizen of the United States?						authorized to work in the U.S.?			
Have you ev	ver worked for this company		If yes, whe	n?						
Have you ev	ver been convicted of a felor	y?								
If yes, expla	in:									
Education										
High School	l:	Addres								
		Did you graduate	? <u>YES</u>	NO						
College:		Address		NO						
		Did you graduate	? <u>YES</u>	NO	Degree:					
Other:		Address		NO						
		Did you graduate	? <u>YES</u>	NO	Degree:					
References										
Please list t	three professional referenc	es.								
Full Name:		Re	elationship:							
Company:					Phone:	(	)			
Address:										
Full Name:	Relationship:									
Company:					Phone:	(	)			
Address:										
Full Name:		Re	elationship:							
Company:					Phone:	(	)			
Address:										

Previous Employment										
Company:			Phone: ( )							
Address:			Supervisor:							
Job Title: Start	ting Salary:	\$	Ending Salary: \$							
Responsibilities:	D (									
From: To: May we contact your previous supervisor for a reference?	Reason for Leaving:	YES	NO							
Company:			Phone: ( )							
Address:			Supervisor:							
Job Title: Start	ting Salary:	\$	Ending Salary: \$							
	Reason for									
From: To:  May we contact your previous supervisor for a reference?	Leaving:	YES	NO							
Company:			Phone: ( )							
Address:			Supervisor:							
Job Title: Start	ting Salary:	\$	Ending Salary: \$							
Responsibilities:	D (									
From: To: May we contact your previous supervisor for a reference?	Reason for Leaving:	YES	NO 🔲							
Military Service										
Branch:			From: To:							
Rank at Discharge:		Type of Discharge:								
If other than honorable, explain:										
	Disclaime	r and Signat	ture							
This application does not constitute a contract for employment. The City of Glen Ullin is an equal opportunity employer. I hereby give the City of Glen Ullin permission to conduct a background check and release the city from all liability arising from any such check. I certify that my answers are true and complete to the best of my knowledge.										
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I also understand that all applicants that drive city equipment will be required to submit to a pre-employment drug screen with random testing throughout employment.										
Signature:			Date:							