

# Application for Employment



411 7th Ave. • PO Box 729 | Langdon, ND 58249  
1.800.844.9708 • www.utma.com

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. This institution is an equal opportunity provider and employer.

Last Name	First Name	Middle Name	Applicant ID #	
Street		City	State	Zip Code
Home Telephone		Cellular/Other	Email	
Position(s) Applied For			Date of Application	

## Referral Source (Please check the appropriate category and list the source.)

<input type="checkbox"/> Walk-In _____	<input type="checkbox"/> School _____
<input type="checkbox"/> Employee _____	<input type="checkbox"/> Job Fair _____
<input type="checkbox"/> Advertisement _____	<input type="checkbox"/> Staffing Agency _____
<input type="checkbox"/> Company's Website _____	<input type="checkbox"/> Government _____
<input type="checkbox"/> Other Internet _____	<input type="checkbox"/> Employment Agency _____
	<input type="checkbox"/> Other _____

If necessary, the best time to call you is: \_\_\_\_\_

Via: ☐ Home ☐ Cellular/Other

May we contact you at work? ☐ Yes ☐ No

If **yes**, work # and best time to call: \_\_\_\_\_

If you are under 18 and it is required, can you furnish a work permit? ☐ Yes ☐ No

If **no**, please explain: \_\_\_\_\_

Have you submitted an application here before? ☐ Yes ☐ No

If **yes**, give date(s) and position(s):

Have you ever been employed here before? ☐ Yes ☐ No  
If **yes**, give dates:

From (MM/DD/YY) \_\_\_\_\_ To (MM/DD/YY) \_\_\_\_\_

Is this application a request for reemployment following an extended military leave of absence from this company?

☐ Yes ☐ No

Are you legally eligible for employment in this country?

☐ Yes ☐ No

Date available for work (MM/DD/YY): \_\_\_\_\_

Salary/Wage Desired \_\_\_\_\_ Per \_\_\_\_\_

Type of employment desired: ☐ Full-Time ☐ Part-Time  
☐ Educational Co-Op ☐ Seasonal ☐ Temporary

Will you relocate if the job requires it?

☐ Yes ☐ No

Will you travel if the job requires it?

☐ Yes ☐ No

If they have been explained to you, are you able to meet the attendance requirements of the position?

☐ Yes ☐ No ☐ N/A

Will you work overtime if required? ☐ Yes ☐ No

If **no**, please explain:

Driver's license number required if driving may be required in the job for which you are applying:

DL #

State

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our company?

☐ Yes If yes, please explain:

☐ No

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?

This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, any particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

☐ Yes ☐ No ☐ Need more information about the job's "essential functions" to respond

Have you ever been bonded? ☐ Yes ☐ No

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to or been convicted of a crime? ☐ Yes ☐ No

If yes, please provide date(s) and details:

## Employment History

Starting with your most recent employer, provide the following information.

Employer	Telephone #	Dates Employed (MM/DD/YY to MM/DD/YY)
Street Address	City	State
Starting Job Title/Final Job Title		Starting Wage: <input type="radio"/> Hourly \$ Amount per <input type="radio"/> Salary
		Commission/Bonus/Other \$ Amount
Immediate Supervisor & Title (for most recent position held)		Final Wage: <input type="radio"/> Hourly \$ Amount per <input type="radio"/> Salary
May We Contact for Reference? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Later		Commission/Bonus/Other \$ Amount
Email	Why did you leave?	

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

## Employment History

Continued from previous page

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Street Address	City	State	Starting Wage: <input type="radio"/> Hourly		\$ Amount per
			<input type="radio"/> Salary		
Starting Job Title/Final Job Title			Commission/Bonus/Other	\$ Amount	
Immediate Supervisor & Title (for most recent position held)			Final Wage: <input type="radio"/> Hourly	\$ Amount per	
May We Contact for Reference? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Later			<input type="radio"/> Salary		
			Commission/Bonus/Other	\$ Amount	
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## Employment History

Continued from previous page

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

If not addressed on previous page, have you ever been fired or asked to resign from a job? ☐ Yes ☐ No

If yes, please explain:

## Skills & Qualifications

List any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

**Computer Skills** (Check appropriate boxes. Include software titles and years of experience.)

<input type="checkbox"/> Word Processing _____	<input type="checkbox"/> Internet _____
<input type="checkbox"/> Spreadsheet _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Presentation _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Email _____	<input type="checkbox"/> Other _____

## Education

Starting with your most recent school attended, provide the following information.

School (Include City and State)	Years	Degree(s)	GPA	Major/Minor

## References

List names and telephone numbers of three business/work references who are **not** related to you and are **not** previous supervisors. If not applicable, list three school or personal references who are **not** related to you.

Name	Title	Relationship to You	Telephone	Email	# Years Known

## Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or physical disabilities, veteran/ reserve, National Guard or any other similarly protected status.

Organization	Offices Held

List any special accomplishments, publications, awards, etc.

Exclude memberships that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or physical disabilities, veteran/ reserve, National Guard or any other similarly protected status.

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In your current or previous job, have you ever written instructions or directions to be followed by employees or customers?

☐ Yes   ☐ No   ☐ Not Applicable

If **yes**, please explain:

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Is there any other job-related information you want us to know about you?

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## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions, and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

**This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, genetic information, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.**

**I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect (i) will be sufficient cause to eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.**

UTMA is the recipient of Federal financial assistance from the U. S. Department of Agriculture (USDA). The USDA prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or a part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.)

Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202.720.2600 (voice and TDD).

To file a complaint of discrimination, write to:

USDA

Director, Office of Civil Rights

1400 Independence Avenue, S.W.

Washington, D.C. 20250-0703

Or, call 800.787.8821 and select Option 2, or call 202.692.0107 (TDD).

USDA is an equal opportunity provider, employer, and lender.