

Application for Employment

* Required

Equal access to programs, services and employment opportunities is available to all persons without regard to race, color, religion, sex (including pregnancy), national origin, age, physical or mental disability, marital or public assistance status, genetic information, or any other basis protected by federal, state, and/or local law.

In accordance with the Americans with Disabilities Act and/or applicable state and local laws, applicants requiring reasonable accommodations for the application and/or interview process should notify the Human Resources Department. Examples of reasonable accommodations include making a change to the application process; providing written materials in an alternate format such as braille, large print, or audio recording; using a sign language interpreter; using specialized equipment; or modifying testing conditions.

Personal Information

First Name *

Last Name *

Middle Name

Street Address *

City *

State *

ZIP Code *

Email Address *

Phone Number (Home) *

Phone Number (Cell)

Position(s) applied for *

Referral Source

Employment Eligibility

Date Available for Work

Have you submitted an application here before?

 Yes No

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

Are you lawfully authorized to work in the United States?

 Yes No

Reasonable Accommodation

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, 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.

Employment History

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

Employer

Phone Number

Dates Employed
From:

To:

Starting Job Title

Final Job Title

Summarize the type of work performed and job responsibilities:

Employer

Phone Number

Dates Employed
From:

To:

Starting Job Title

Final Job Title

Summarize the type of work performed and job responsibilities:

Employer

Phone Number

Dates Employed
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To:

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Final Job Title

Summarize the type of work performed and job responsibilities:

Employer

Phone Number

Dates Employed
From:

To:

Starting Job Title

Final Job Title

Summarize the type of work performed and job responsibilities:

Educational Background

School Name

City & State

Number of Years Completed

Major/Minor/Certificate

School Name	City & State	Number of Years Completed
_____	_____	_____
Major/Minor/Certificate		

School Name	City & State	Number of Years Completed
_____	_____	_____
Major/Minor/Certificate		

References

Name	Title	Number of Years Known
_____	_____	_____
Phone Number		

Name	Title	Number of Years Known
_____	_____	_____
Phone Number		

Name	Title	Number of Years Known
_____	_____	_____
Phone Number		

Related Information

When answering these questions, please exclude any information that would reveal race, color, religion, sex (including pregnancy), national origin, age, physical or mental disability, marital or public assistance status, genetic information, or other similarly protected status.

List any relevant volunteer work:

List special accomplishments, publications, awards, etc.:

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

Applicant Statement and Signature

I certify that all information I have provided in order to apply for and secure work with the 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 60 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.

I understand that reasonable safeguards will be taken to protect all personal information provided or obtained in conjunction with this application for employment. My personal information may be shared with the employer's affiliate(s) and third parties engaged by the employer to perform services for the employer. Any personal information shared with an affiliate or third party is to be used solely to perform the services requested by the employer.

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 race, color, religion, sex (including pregnancy), national origin, age, physical or mental disability, marital or public assistance status, genetic information, or any other protected status under applicable federal, state, or local law.

NOTE: This company complies with North Dakota law prohibiting smoking within 20 feet of entrance and inside places of employment.

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

Signature of Applicant *

Date Signed *

Important note: This job application includes attorney-approved questions prepared specifically for West Fargo Park District to hire in North Dakota.

