

APPLICATION FOR EMPLOYMENT
North Dakota Grain Dealers Association
Complete all applicable information

Personal Information

Name: (Full-Last, First, MI): _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Email Address: _____

When could you start employment? _____

Employment History (List below the last three employers, starting with the most recent one first)

Present or Last Position: _____ From Mo./Yr. _____ to Mo./Yr. _____

Name of Company: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Duties: _____

Reason for leaving or considering it: _____

Starting Annual Salary: _____ Final Annual Salary: _____

May we contact your supervisor? Yes _____ No _____

Name of supervisor: _____ Phone number of supervisor: _____

Title and Department of Supervisor: _____

Next previous position: _____ From Mo./Yr. _____ to Mo./Yr. _____

Name of Company: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Duties: _____

Reason for leaving: _____

Starting Annual Salary: _____ Final Annual Salary: _____

May we contact your supervisor? Yes _____ No _____

Name of supervisor: _____ Phone number of supervisor: _____

Title and Department of Supervisor: _____

Next previous position: _____ From Mo./Yr. _____ to Mo./Yr. _____

Name of Company: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Duties: _____

Reason for leaving: _____

Starting Annual Salary: _____ Final Annual Salary: _____

May we contact your supervisor? Yes____ No____

Name of supervisor: _____ Phone number of supervisor: _____

Title and Department of Supervisor: _____

With what kind of people do you like working? _____

With what kind of people do you find it most difficult to work? _____

Education Information

High school: _____ Degree: _____

Address: _____ City: _____ State: _____

College: _____ Degree: _____ Major: _____

Address: _____ City: _____ State: _____

Graduate School: _____ Degree: _____ Major: _____

Address: _____ City: _____ State: _____

Other: _____ Degree: _____ Major: _____

Address: _____ City: _____ State: _____

In what computer uses and software programs are you proficient?

References: (Please provide the following information on three references who have definite knowledge of your qualifications, skills and abilities to perform the position you are applying for and who we can contact.)

Name: _____ Phone number: _____

Position/Business: _____

Name: _____ Phone number: _____

Position/Business: _____

Name: _____ Phone number: _____

Position/Business: _____

Is there any type of work that your physical or mental condition prohibits, or have you ever been advised by a physician not to perform certain types of work? If so, please explain: _____

Please Read The Following Statements Carefully!

In consideration of my employment, I recognize that my employment is at will and that my employment may be terminated at any time at will with or without cause.

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application or omission of fact on either this application or during the pre-employment process, is grounds for dismissal.

I hereby consent to the release of information requested by the North Dakota Grain Dealers Association from any and all educational institutions, law enforcement agencies, references, current and former employers. If there are any exceptions, note them here:

I acknowledge that I have read and understand the above agreement.

Dated: _____

(Signature)