

Application for Employment

Living Hope

1305 19th Street SW
Willmar, MN 56201

PLEASE PRINT

Equal access to programs, services and employment is available to all qualified persons.

Position(s) desired _____ Date of application ___/___/___

Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP CODE

Telephone # (____) _____ Mobile/Other Phone # (____) _____ Social Security # _____

Are you of legal age to work? _____ Date of Birth _____

Have you ever been employed here before? Yes No If yes, when? _____

Are you legally eligible for employment in this country? Yes No

Date available for work ___/___/___ Type of employment desired Full-time Part-time On-call

Employment History--List below present and past employment, beginning with the most recent.

FROM	TO	EMPLOYER	TELEPHONE
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
REASON FOR LEAVING		HOURLY RATE / SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____	

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JOB TITLE		ADDRESS	
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REASON FOR LEAVING		HOURLY RATE / SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____	

Skills and Qualifications

List any other experiences, skills, or qualifications which will be of special benefit in the job for which you are applying.
(Applicant should not list any information that Federal and/or State law precludes obtaining in the pre-employment stage.)

Educational Background

NAME AND LOCATION	YEARS COMPLETED	DID YOU GRADUATE?		COURSE OF STUDY
HIGH SCHOOL				
COLLEGE		MAJOR	DEGREE	
OTHER				

Employment References

NAME	TELEPHONE	YEARS KNOWN	RELATIONSHIP

Please Read AND Sign Below

- I understand that if I am employed any misrepresentation or material omission made by me on this application, resumé, or other materials I have submitted will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.
- I give the employer and its agents the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application, resumé, or other materials I have submitted. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.
- I understand that the employer may, for valid employment reasons (i.e., making hiring and/or promoting decisions, and/or conducting workplace investigations into theft, fraud, etc.) obtain my credit and/or criminal background report(s). I give the employer and its agents authorization to obtain such investigative consumer reports, and hereby provide my social security number and date of birth in order to secure such reports. Social Security Number _____ Date of Birth ____/____/____
- I understand that this application is not and is not intended to be a contract of employment, nor does this application obligate Living Hope in any way to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. I understand that no one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.
- I also understand that if I am hired, I will be required to provide proof of identify and legal work authorization.

Living Hope does not unlawfully discriminate in employment and no questions on this application are used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date ____/____/____