

APPLICATION FOR EMPLOYMENT



ALL INFORMATION PROVIDED IS SUBJECT TO THE NORTH DAKOTA OPEN RECORDS LAW | EQUAL OPPORTUNITY EMPLOYER

TODAY'S DATE:

MUST COMPLETE APPLICATION IN FULL | PRINT OR TYPE
IF ACCOMMODATION IS NEEDED, PLEASE CONTACT 701-456-2074

PART I POSITION INFORMATION

Position Status: Part-time Seasonal Full-Time

Interested Positions: Please visit dickinsonparks.org to see a listing of current positions available. Be specific, don't use "any position"

1.	2.	3.
----	----	----

PART II PERSONAL INFORMATION

FIRST NAME:		LAST NAME:	
ADDRESS:		CITY/STATE:	ZIP:
EMAIL ADDRESS:		PHONE:	
Are you age 16 or older?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you age 18 or older?	YES <input type="checkbox"/> NO <input type="checkbox"/> Are you eligible to work in the United States?
Are/were you in the Armed Forces?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, what Branch?	
Current Drivers License:	YES <input type="checkbox"/> NO <input type="checkbox"/>	Class:	State:
Have you worked with us before?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, what position and when?	

PART III GENERAL INFORMATION

Date available to begin employment?

Are you willing to work weekends/holidays? YES NO

Are you willing to work both days and evenings? YES NO

Work Availability: 10-20 Hours 20-30 Hours 30-40 Hours Other

Work Availability Comments:

PART IV EDUCATIONAL PREPARATION (High School, College / Trade School)

Name of School:	
City/State:	Dates Attended:
Name of School:	
City/State:	Dates Attended:
Name of School:	
City/State:	Dates Attended:

PART V OTHER TRAINING, LICENSES, CERTIFICATES

List any special qualifications relevant to the position for which you are applying and are not covered elsewhere in your application (such as technical skills and/or computer, childcare training, CPR, First Aid, WSI, Lifeguard Certification, etc.) For licenses and certificates you must include date and place of issuance, date of expiration and be able to present a copy of certification if hired.

PART VI WORK EXPERIENCE (List last two jobs held, including current one)

1. Name of Business:

City/State:	
Supervisor:	Phone:
Describe type of work you did:	
Employment Dates:	Reason for leaving:
May we contact this employer?	

2. Name of Business:

City/State:	
Supervisor:	Phone:
Describe type of work you did:	
Employment Dates:	Reason for leaving:
May we contact this employer?	

PART VII PERSONAL REFERENCES

List individuals who are not related to you and are not previous employers

Name:	Phone:	Relationship:
Name:	Phone:	Relationship:
Name:	Phone:	Relationship:

PART VIII AUTHORIZATION

I certify that all facts contained in this application are true and complete to the best of my knowledge and understand and agree that any misstatement will be grounds for disqualification and dismissal from employment by Dickinson Parks and Recreation. I authorize investigation of all statements contained herein and the references and employers listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, to include a background check into felony convictions and child neglect or abuse and release Dickinson Parks and Recreation of any liability and any damage that may result from utilization of such information. I understand by providing information on this application that there is no contractual or implied agreement between myself and Dickinson Parks and Recreation.

Applicant Signature:

Date:

THANK YOU FOR YOUR INTEREST IN DICKINSON PARKS & RECREATION

RETURN COMPLETED APPLICATION TO:



Dickinson Parks & Recreation
2004 Fairway Street
Dickinson, ND 58601
(located inside the
West River Community Center)

QUESTIONS? NEED MORE INFO?



WEBSITE
dickinsonparks.org



EMAIL
dprd@dickinsonparks.org



PHONE