



# APPLICATION FOR EMPLOYMENT

## Bismarck Public Schools

Bismarck, ND 58501

Equal Opportunity Employer

Bismarck Public Schools does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or the provision of services and complies with the provisions of the North Dakota Human Rights Act.

### GENERAL INFORMATION (please print or type)

If accommodation or assistance is needed in completing this application, please contact the Human Resources Office at 355-3070.

|  |  |                |       |                        |
|--|--|----------------|-------|------------------------|
| NAME (Last, First, Middle Initial)   |  | email address: |       | Business Telephone No. |
| MAILING ADDRESS  |  | City           | State | Zip Code               |
| Are you prevented from lawfully becoming employed in the United States because of Visa or Immigrant Status? <input type="radio"/> Yes <input type="radio"/> No<br>Proof of citizenship or immigration status will be required upon employment. |  |                |       | Home Telephone No.     |
|  |  |                |       | Cell Phone No.         |

### POSITION(S) APPLYING FOR:

### TYPE OF EMPLOYMENT YOU WILL ACCEPT:

|                |  |
|----------------|--|
| FIRST CHOICE:  | Check all that apply below:<br><input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME<br><input type="checkbox"/> TEMPORARY <input type="checkbox"/> SHIFT WORK |
| SECOND CHOICE: |  |

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No

Have you been convicted of a felony within the last 7 years?  Yes  No

Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain: \_\_\_\_\_

### VETERAN'S PREFERENCE (NDCC 37-19.1)

Do you claim Veteran's Preference?  No  Yes - Attach report of Separation DD-214  
 Do you claim Disabled Veteran's Preference?  No  Yes - Attach current VA Disability Certification and Report of Separation DD-214  
**VETERAN ELIGIBILITY:** You must be a North Dakota resident and have served in the active military forces during a period of war as established in the North Dakota Century Code 37-01-40, or received the armed forces expeditionary or other campaign service medal during an emergency condition, and must have been released therefrom under honorable conditions. The last three war periods were: August 5, 1964 through May 7, 1975; June 27, 1950 through January 31, 1955; and December 7, 1941 through December 31, 1946. Applicants claiming veteran's preference must attach a copy of REPORT OF SEPARATION DD214. Disabled veterans must also include a letter less than one year old from the Veteran's Administration indicating such disability.

### EDUCATION AND/OR TRAINING

Did you graduate from high school?  Yes  No    If you are not a high school graduate, do you have a GED Equivalency Certificate?  Yes  No

College, University, Nursing School, Business College, Vocational School, or any other school you have attended:

| Name and Location | Number of credits earned |      | Field |       | Type of Degree |
|-------------------|--------------------------|------|-------|-------|----------------|
|                   | QTR.                     | SEM. | Major | Minor |                |
|                   |                          |      |       |       |                |
|                   |                          |      |       |       |                |
|                   |                          |      |       |       |                |

Provide information on education/training you have which is not covered above. Indicate special skills you possess; languages you speak, write or understand; voluntary and unpaid work experience, etc. Also list any professional license you currently hold.

## EMPLOYMENT HISTORY

Be specific. This information may be used to determine if your application will be accepted. Start with your present, or most recent job. Include armed forces service and any self-employment. Indicate any change of job title under the same employer as a separate position. IF YOU NEED ADDITIONAL SPACE, ATTACH SEPARATE SHEETS USING THIS SAME FORMAT.

|   |   |  |   |
|---|---|--|---|
| Employer  | Your duties, responsibilities, size of operation, supervision, etc. |  |   |
| Kind of Business  |   |  |   |
| City and State  |   |  |   |
| Title   |   |  |   |
| Name and Title of Immediate Supervisor                                |   |  |   |
| <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time |   |  | Hours Worked Per Week   |
| From (month and year)   |   |  | To (month and year)   |
| Reason for Leaving  |   |  | If still employed, may we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No |

|   |   |  |                       |
|---|---|--|-----------------------|
| Employer  | Your duties, responsibilities, size of operation, supervision, etc. |  |                       |
| Kind of Business  |   |  |                       |
| City and State  |   |  |                       |
| Title   |   |  |                       |
| Name and Title of Immediate Supervisor                                |   |  |                       |
| <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time |   |  | Hours Worked Per Week |
| From (month and year)   |   |  | To (month and year)   |
| Reason for Leaving  |   |  |                       |

|   |   |  |                       |
|---|---|--|-----------------------|
| Employer  | Your duties, responsibilities, size of operation, supervision, etc. |  |                       |
| Kind of Business  |   |  |                       |
| City and State  |   |  |                       |
| Title   |   |  |                       |
| Name and Title of Immediate Supervisor                                |   |  |                       |
| <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time |   |  | Hours Worked Per Week |
| From (month and year)   |   |  | To (month and year)   |
| Reason for Leaving  |   |  |                       |

## CERTIFICATION AND AGREEMENT: PLEASE READ BEFORE SIGNING!

I hereby certify that this application contains no willful misrepresentation or falsification and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, my application will be rejected and I may be removed from the job after appointment. I understand that under State and Federal laws, I cannot be discriminated against in employment, including consideration for promotion, for reasons of race, color, religion, national origin, sex, or on the basis of age, physical or mental disability or status with respect to marriage or public assistance. I further understand that this employment application and other employment related documents I may have been furnished are not contracts of employment; also, that any oral or written statements to the contrary are hereby expressly disavowed. The employer has my authorization to thoroughly investigate my work and personal history which is job-related. I certify that I will hold no person, corporation, or organization liable for giving or receiving information in this investigation.

Signature of applicant: \_\_\_\_\_ Date \_\_\_\_\_