APPLICATION FOR EMPLOYMENT



SUMMER WEED WORKER

Thank you for your interest in employment with Mountrail County. Mountrail County is an Equal Opportunity Employer. Applicants are considered for all positions without regard to race, color, religion, national origin, age, sex, political beliefs, disability, or status with respect to marriage or public assistance and complies with the provisions of the North Dakota Human Rights Act.

Applications will be accepted until position is filled at the Office of the Mountrail County Human Resources Department, PO Box 69, 101 N Main Ave, Stanley ND 58784.

GENERAL INFORMATION												
FULL NAME												
MAILING ADDRESS	CITY/STATE/ZIP											
MAILING ADDRESS	OIT I/OTATE/AII											
PHONE #	EMAIL ADDRESS											
Can you provide proof, if hired, that you are eligible to	work in the United States?											
On what date would you be available to work?												
EDUCAT	TION / TRAINING											
Did you graduate from High School or receive a GED												
Other Education/Training	· · · · · · · · · · · · · · · · · · ·											
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OUA	IEICATIONS											
QUALIFICATIONS												
EMPLOYMENT / PRO	OFESSIONAL REFERENCES											
Please list as references, three people that have know	vledge of you and your qualifications. No relatives please.											
NAME ADDRESS (City/S	tate/Zip) PHONE # (Work/Cell)											
You must be a United States resident and have serve received the armed forces expeditionary or other cam	I'S PREFERENCE d in the active military forces during a period of war or paign service medal during an emergency condition, and ble conditions. See North Dakota Century Code 37-19.1.											
Are you claiming Veteran's Preference under Section ☐ No ☐ Y	37-19.1 of the NDCC? es; attach DD-214 & Report of Separation											

EMPL Attach a separate sheet of paper for any addition	OYMENT EXPERIENCE
NAME OF MOST CURRENT EMPLOYER	PHONE #
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Logitify that my anawara are true and complete to the	DISCLAIMER
I have not had a criminal driver's record on abstract	best of my knowledge and that I am at least 18 years of age. I certify that for the past five (5) years. I authorize Mountrail County to perform a pre-
	t pass a pre-employment drug and/or alcohol testing if offered a position in
accordance to Mountrail County's "Drug & Alcohol Us	se & Testing Policy". If this application leads to employment, I understand
that false or misleading information in my application	or interview may result in my release.
O'matematical Applicant	
Signature of Applicant	Date

MOUNTRAIL COUNTY, ND

EQUAL EMPLOYMENT OPPORTUNITY FORM

We invite you to complete the enclosed Equal Employment Opportunity form and return it to our Title VI Coordinator in the enclosed envelope.

This information is kept separate from your application and is used for statistical purposes only.

Submission of this information is completely voluntary and will be kept confidential.

Nichole Degenstein

Mountrail County Title VI Coordinator

Enclosures

EQUAL EMPLOYMENT OPPORTUNITY

Mountrail County (2-2012)

Mountrail County is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the County invites you to voluntarily self-identify your race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatments. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to the summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

This form will not be part of your application file or

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