

RICHLAND COUNTY JOB APPLICATION

418 2ND AVE N
WAHPETON, ND 58075

Rev.04/01/2021

* Follow instructions carefully * Provide detail - do not use "see resume" * Check for errors before submitting
* Print or type * If accommodation or assistance is needed in completing this application, contact the employing agency.

GENERAL INFORMATION(Please print or type):

Name (Last, First, Middle Initial)			Home Telephone No.		
			Work Telephone No.		
Mailing Address	City	State	Zip Code	E-mail address	
				Cell Phone No.	
Are you either a U.S. citizen or an alien authorized to work in the U.S.A.?			Yes	No	
Can you provide proof, if hired, that you are eligible to work in the U. S. A.?			Yes	No	
How did you learn about this opening?					

POSITION(S) APPLYING FOR:

TYPE OF EMPLOYMENT YOU WILL ACCEPT:

First Choice:	Check all that apply below: PERMANENT FULL TIME SHIFTS TEMPORARY PART TIME
Second Choice:	

VETERAN'S PREFERENCE (NDCC 37-19.1)

Veteran's Preference?	NO	YES	Must Attach Report of Separation DD-214
Disabled Veteran's Preference?	NO	YES	Must attach DD-214, Report of Separation & a letter less than one year old from Veteran's Administration indicating disability.
Spouse of 100% Disable Veteran?	NO	YES	Must attach copy of marriage certificate, DD-214, & letter less than one year old from Veteran's Administration indicating disability.
Spouse of Deceased Veteran	NO	YES	Must attach copy of marriage certificate, DD-214, & veteran's death certificate

VETERAN ELIGIBILITY: You must be a ND resident and have served in the active military forces during a period of war or received the armed forces expeditionary or other campaign service medal during an emergency condition, and must have been released under other than dishonorable conditions. See ND 37-19.1.

EDUCATION AND/OR TRAINING:

Did you graduate from high school or receive a GED Certificate?			Yes	No		
School Name & Location (College, business, nursing, vocational, other)	No. of Credits				Did you graduate?	Diploma/ Degree
	QTR.	SEM.	Major/Minor		Yes	
					No	
					Yes	
					No	
					Yes	
					No	

Other education/training/skills:

Skills: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge and note your level of proficiency (basic, intermediate or expert)

Current professional license/certificate/registration & any Related volunteer Experience:

Description: _____ #: _____ Date Issued _____ Exp. Date _____
Description: _____ #: _____ Date Issued _____ Exp. Date _____

YOUR EMPLOYMENT HISTORY:

- * Start with your current or last job - include armed forces service and self-employment.
- * Any change of job title under the same employer should be considered a separate position.
- * **ATTACH EXTRA SHEETS** using the same format if you have additional employment history.

May we contact your current employer for a reference?			Yes	No	Not applicable
Employer		Telephone No.	Supervisor's Name		
Type of Business	Address				
Your Job Title	Dates Employed(indicate months&years) From: TO:		Average Hrs Worked Per Week:		
Duties:					
Monthly Salary		Reason for leaving			

May we contact this employer for a reference?			Yes	No	Not applicable
Employer		Telephone No.	Supervisor's Name		
Type of Business	Address				
Your Job Title	Dates Employed(indicate months&years) From: TO:		Average Hrs Worked Per Week:		
Duties:					
Monthly Salary		Reason for leaving			

May we contact this employer for a reference?			Yes	No	Not applicable
Employer		Telephone No.	Supervisor's Name		
Type of Business	Address				
Your Job Title	Dates Employed(indicate months&years) From: TO:		Average Hrs Worked Per Week:		
Duties:					
Monthly Salary		Reason for leaving			

REFERENCES:

Please list the names, addresses and phone numbers of three work-related references who have definite knowledge of your qualifications, skills and abilities to perform the position you are applying for.

Name of Reference _____	Title _____
Address _____	Phone # _____
Name of Reference _____	Title _____
Address _____	Phone # _____
Name of Reference _____	Title _____
Address _____	Phone # _____

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 contract of employment; also, that any oral or written statements to the contrary are hereby expressly disavowed. Richland County has my authorization to thoroughly investigate my work and personal history in this investigation which is job related. I certify that I will hold no person, corporation, or organization liable for giving or receiving information in this investigation. The application will remain active for 30 days from date signed. Richland County shall retain this application for a period of three years from the date signed.

If I have not heard from Richland County and would like to be considered for employment once my application expires, I must fill out a new application, if three years have elapsed, or re-activate my prior application if three years have elapsed.

If I become employed with Richland County, employment can be terminated with or without cause and with or without notice at the option of either the employee or Richland County.

Signature of Applicant: _____ Date: _____

EQUAL OPPORTUNITY EMPLOYER: Richland County 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.

All personnel records, EXCEPT personal health and medical records, are subject to the North Dakota open records laws.

**INFORMATION RELEASE AUTHORIZATION
FOR EMPLOYMENT CONSIDERATION**

Richland County, State of North Dakota

General Instructions:

**Hiring authorities may provide a copy of this completed release form to reference and/or criminal background records check sources when checking an applicant's references or background.

I. To Be Completed by the Hiring Authority		
Agency Name: Richland County, ND	Telephone number: 701.642.7700	Fax number: 701.642.7701
Address: 418 Second Avenue North		
City: Wahpeton	State: ND	Zip: 58075
Type of Background Check to be Conducted: (check all that apply):		
<input type="checkbox"/> Personal and/or Professional	<input type="checkbox"/> Credit	<input type="checkbox"/> Criminal Background Records Check
II. To Be Completed by Applicant		
Last Name:	First Name:	Middle Name:
Other Name(s) Use (Maiden, Former, AKA, Etc.)		
Last Name:	First Name:	Middle Name:
Birth Date:(Required for criminal background check)		Social Security Number:
Current Address:		
City:	State:	Zip:

As an applicant for employment with Richland County, I understand that a background records check may be completed.

All background checks will be completed as directly related to the available position. I hereby waive and release Richland County, its officers, employees, and agents, both in their official and individual capacities, from any and all legal liability for damages that result from the furnishing or receiving of such criminal records information.

In addition, in order to provide Richland County with information and opinion that may be useful to Richland County in its hiring decision, I hereby authorize any person, school, current or former employer, organization, or entity disclosed in my resume, application, or interview process to provide any information regarding me. This information and opinion may include but is not limited to my dates of employment, job title and classification, compensation history, reasons for leaving, job-related knowledge and skills, job performance, attendance record, disciplinary action and general character. I understand that the information and opinion provided about me may be negative or positive. I unconditionally release each person, school, employer, organization or other entity who provides information or opinion regarding myself from any and all legal liability from damages that may result from furnishing such information and in making such statements. This release supercedes any agreement or contract I may have previously made to the contrary with any such person, school, employer, organization, or other entity. I further release Richland County, its officers, employees, and agents, both in their official and individual capacities, from any and all legal liability for damages that result from the use or disclosure of such information.

A photocopy of this signed release shall have the same force and effect as the original release executed by me below.

Applicant's Signature:	Date:
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