

APPLICATION FOR EMPLOYMENT

Name Date of Application
First MI Last

Location Interested In Position Applied For

Address
NUMBER & STREET

Social Security Number:

CITY STATE ZIP

Telephone Numbers: Home Cell
INCLUDE AREA CODE INCLUDE AREA CODE

Email Address

Are you at least 16 years of age? Yes No Are you at least 18 years of age? Yes No

Have you ever been employed with Northern Star Cooperative? Yes No

If yes, give dates: From To Location:

Do you have any relatives currently working for Northern Star Cooperative? Yes No

If yes, give name, location and position:

Are you eligible for work in the United States of America? Yes No

Are you available to work Full-time Part-time

Are you available to work: **Days** Yes No **Evenings** Yes No

Over Nights Yes No **Weekends** Yes No **Holidays** Yes No

On what date would you be available to begin work?

Have you ever been convicted of a crime other than a routine traffic violation? Yes No

If yes, give dates and circumstances

TELL US MORE ABOUT YOU

EDUCATION

Did you graduate Please print name city & state
Yes HIGH SCHOOL
No
Yes COLLEGE
No
Yes OTHER
No

SPECIAL SKILLS AND QUALIFICATIONS

List equipment, machinery, special skills and qualifications acquired from past employment experience:

List applicable professional or technical licenses or certification(s) relative to the position for which you are applying

EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include military service assignments.

1.

Past Employer & Address	Job Title	Employment Dates From:	To:
	Supervisor Telephone Number	Wage/Salary Start:	Final:
Duties and Responsibilities:			

Reason For Leaving::

2.

Past Employer & Address	Job Title	Employment Dates From:	To:
	Supervisor Telephone Number	Wage/Salary Start:	Final:
Duties and Responsibilities:			

Reason For Leaving::

3.

Past Employer & Address	Job Title	Employment Dates From:	To:
	Supervisor Telephone Number	Wage/Salary Start:	Final:

Duties and Responsibilities:

Reason For Leaving::

4.

Past Employer & Address	Job Title	Employment Dates From:	To:
	Supervisor Telephone Number	Wage/Salary Start:	Final:

Duties and Responsibilities:

Reason For Leaving::

APPLICANT’S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of an offer of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer. I understand all offers of employment may be subject to passing a physical, drug test and a criminal background check. I authorize representatives of Northern star Cooperative to conduct such a check and will make myself available for testing or provide additional information as requested to complete the aforementioned tests. I understand that if hired by Northern star Cooperative my employment is **at will** and may be severed by either party at any time with or without cause. I understand that neither this document nor any offer of employment from Northern star Cooperative constitute an employment contract.

Applicant’s Signature

Date

Please print one copy for your records and sign a second copy to send to:

**Employment Inquiry
Northern Star Cooperative
PO Box 458
Deer River, MN 56636**

Or Fax a signed copy to: (218) 246-8248

Thank you for interest in Northern Star Cooperative.