

Osakis Public School
Osakis, MN
APPLICATION FOR EMPLOYMENT - CLERICAL

Date of Application _____

Name _____

Mailing Address _____ City, State, Zip Code _____

Telephone Number (home) _____ (work) _____ Social Security No. _____

Are you a U.S. Citizen? _____ Yes _____ No Are you a Veteran? _____ Yes _____ No

Would you like to be placed on the list to be considered for substitute work if there are no vacancies in your area? _____ Yes _____ No

PRESENT EMPLOYMENT: If you are presently employed, please complete the following:

Employer _____ Address _____

Name and Title of Immediate Supervisor _____

Position _____ Brief Description of your Duties _____

How long have you been employed with this company/business? _____ Present Salary _____

May we contact your present employer? _____ Yes _____ No If not, please explain _____

When are you available for employment? _____

PRIOR EMPLOYMENT: List previous work experience in order, beginning with the most recent, other than present job, which is described above.

Date From	Date To	Name and Address of Employer	Supervisor and Telephone No.	Position and Duties	Salary	Reason for Leaving

EDUCATIONAL BACKGROUND:

School and Location	Major Subject	Did you Graduate?	Degree Earned

An Equal Opportunity Employer

REFERENCES: List those who can speak of your qualifications for this position. Former employers, supervisors, etc., would be helpful. Names need not correlate with those on the reference forms. Do not include more than one personal reference.

Name	Address	Telephone	Relationship to You

Indicate below specific experience you have had:

Check Here	Experience	Remarks
_____ Calculator	_____	_____
_____ General Secretary	_____	_____
_____ Type (speed: _____ wpm)	_____	_____
_____ Original Correspondence	_____	_____
_____ Statistical Work	_____	_____
_____ Receptionist	_____	_____
_____ Bookkeeping	_____	_____
_____ Shorthand (speed: _____ wpm)	_____	_____
_____ Computers (list type)	_____	_____
_____ Other	_____	_____

Write a paragraph stating experience and skills you have that would enhance your qualifications for this position:

Other comments you wish to add in support of your application for this type of position:

Applicant Signature _____

_____ Date

Any person who, with intent to defraud, receives worker's compensation benefits to which the person is not entitled by knowingly misrepresenting, misstating, or failing to disclose any material fact is guilty of theft and shall be sentenced pursuant to section 609.52, subdivision 3.