

# Middle Snake Tamarac Rivers Watershed District

453 N McKinley St, Warren, MN 56762

218-745-4741

www.mstrwd.org

Email: info@mstrwd.org

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age physical or mental disability.

Name \_\_\_\_\_ Date of Application \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

## GENERAL INFORMATION:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation?  Yes  No

Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying).  Yes  No If yes, please explain:

## EDUCATION & TRAINING:

Circle last grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters \_\_\_\_\_ Doctorate \_\_\_\_\_

Name & Address of School	Major Course Studied	Graduate or Degree (Y or N)	Average Grade
College or University/Address			
Other School (Technical, Vocational, Graduate, etc)/ Address			
List any scholarships, academic honors, awards or special achievements:			

**SKILLS:** Please list any skills you have that are appropriate for the position you are applying: \_\_\_\_\_

If required, will you work? Overtime  Yes  No

Weekends:  Yes  No

Position You are applying for: \_\_\_\_\_

Salary Requirements: \_\_\_\_\_  Per Hour  Per Month

Date you can start: \_\_\_\_/\_\_\_\_/\_\_\_\_

**EMPLOYMENT HISTORY:**

Starting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL EMPLOYMENT for at least the past FOUR employers. If currently employed, may we contact your employer:  Yes  No

<b>Name of Employer</b>	<b>Telephone #</b>	<b>Salary Begin &amp; End</b>	<b>Employment Be- gan MO/YR</b>	<b>Employ- ment End MO/YR</b>
Address		City	State/Zip	
Name & Title of Supervisor:		Title of Your Position:		
List Jobs Held, Duties Performed, Skill Used & Promotions While Employed at this Company:				

<b>Name of Employer</b>	<b>Telephone #</b>	<b>Salary Begin &amp; End</b>	<b>Employment Be- gan MO/YR</b>	<b>Employ- ment End MO/YR</b>
Address		City	State/Zip	
Name & Title of Supervisor:		Title of Your Position:		
List Jobs Held, Duties Performed, Skill Used & Promotions While Employed at this Company:				

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Address		City	State/Zip	
Name & Title of Supervisor:		Title of Your Position:		
List Jobs Held, Duties Performed, Skill Used & Promotions While Employed at this Company:				

<b>Name of Employer</b>		<b>Telephone #</b>	<b>Salary Begin &amp; End</b>	<b>Employ- ment Be- gan MO/YR</b>	<b>Employ- ment End MO/YR</b>
Address		City	State/Zip		Reason for Leaving:
Name & Title of Supervisor:			Title of Your Position:		
List Jobs Held, Duties Performed, Skill Used & Promotions While Employed at this Company:					

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Are you a licensed driver? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, issuing State: _____
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<p>INTERESTS/ACCOMPLISHMENTS: You may wish to list significant experience, interests &amp; accomplishments gained while working as a volunteer or as a hobbyist that may be useful in the position(s) you are seeking. Names or organizations designating religion, race, etc. need not be mentioned.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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**NOTE: ATTACH RESUME and COVER LETTER TO THIS APPLICATION**

**READ CAREFULLY:** I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_