

DACOTAH PAPER CO.

"Serving the Area Since 1906"

WHOLESALE PAPER PRODUCTS AND BUILDING MAINTENANCE SUPPLIES

3940 15th Avenue North – P.O. Box 2727 – Phone (701) 281-1734 – Fax (701) 281-9799

Fargo, North Dakota 58108 – www.dacotahpaper.com

APPLICATION FOR EMPLOYMENT

Dacotah Paper Co is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

PERSONAL

Name _____ Date _____
Last First Middle

Address _____

Phone Number _____ Position Sought _____ Full Time _____ Part Time _____

Date Available _____ Salary Desired _____

Are you legally eligible for employment in the United States? Yes _____ No _____

(If offered employment, you will be required to provide documentation to verify eligibility.)

EDUCATION: Please indicate education or training which you believe qualifies you for the position you are seeking. _____

High School: Years Completed (circle one) 1 2 3 4 Diploma: Yes _____ No _____ G.E.D. Yes _____ No _____

School(s) _____ City/State _____

College and/or Vocational School: Years Completed (circle one) 1 2 3 4

School(s) _____ City/State _____

Major _____ Degrees Earned _____

Other Training or Degrees:

School(s) _____ City/State _____

Course _____ Degree or Certificate Earned _____

Professional License or Membership:

Type of License(s) Held _____

Other Professional Memberships _____

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

Employment: List last employer first, including U.S. Military Service.

May we contact your present employer? ____ Yes ____ No

If any employment was under a different name, indicate name _____

Employer _____ Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____ Supervisor _____ Department _____
Mo/Yr Mo/Yr

Duties _____ FT __ PT __ No. of Hrs. ____

Reason for Leaving _____

Employer _____ Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____ Supervisor _____ Department _____
Mo/Yr Mo/Yr

Duties _____ FT __ PT __ No. of Hrs. ____

Reason for Leaving _____

Employer _____ Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____ Supervisor _____ Department _____
Mo/Yr Mo/Yr

Duties _____ FT __ PT __ No. of Hrs. ____

Reason for Leaving _____

Employer _____ Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____ Supervisor _____ Department _____
Mo/Yr Mo/Yr

Duties _____ FT __ PT __ No. of Hrs. ____

Reason for Leaving _____

If you wish to describe additional work experience, attach the information for each position on the back page.

Explain any gaps in work history: _____

Have you ever been discharged or asked to resign from a job? __Yes __No

If yes, explain: _____

**This application for employment is good for 30 days only.
Consideration for employment after 30 days requires a new application.**

APPLICANT’S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Dacotah Paper Co to verify their accuracy and to obtain reference information on my work performance. I hereby release Dacotah Paper Co from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ Date: _____