



# APPLICATION FOR EMPLOYMENT

TURTLE MOUNTAIN COMMUNITY COLLEGE

PO BOX 340 BELCOURT, NORTH DAKOTA 58316

PHONE (701) 477-7862 FAX (701) 477-7870

Turtle Mountain Community College provides equal employment opportunities to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability, sexual orientation, or status as a Vietnam-era or special disabled veteran in accordance with applicable federal laws, except where specific age, sex or physical requirements are a bona fide occupational qualification, or where Indian Preference or Veteran's Preference are appropriately claimed.

Persons of Indian ancestry who are at least 1/4 degree and wish to claim Indian Preference must submit a statement indicating the degree of Indian blood and agency enrollment.

POSITION(S) APPLIED FOR

DATE \_\_\_\_\_

NAME		SOCIAL SECURITY NUMBER	
STREET			APT. NO.
CITY		STATE	ZIP
PHONE NO.	REFERRED BY:		

FULL TIME       PART TIME

Are you willing to work overtime as necessary?      YES       NO

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

Have you ever been employed by us?      YES       NO       If yes, when? \_\_\_\_\_

Is there anything that would prevent you from performing in a reasonable and safe manner the activities involved in the position for which you have applied      YES       NO

If yes, please explain: \_\_\_\_\_

Have you ever been convicted of a crime?\*      YES       NO

If yes, state nature of offense, when, where, and disposition: \_\_\_\_\_

Do you have the legal right to work and remain in the United States?\*\*      YES       NO

\* A conviction record will not necessarily be a bar to employment. This information will be used only for job-related purposes and only to the extent permitted by applicable law.

\*\* Federal laws require that employees hire only individuals who are authorized to be lawfully employed in the United States. In compliance with such laws, TMCC will verify status of every individual offered employment with TMCC. In this connection, all offers of employment are subject to verification of the applicant identity and employment authorization, and will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization upon employment.

State name(s) of any relative(s) in our employment and your relationship to them:

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**EDUCATION**

SCHOOL		
ADDRESS OF SCHOOL, CITY, STATE		
COURSES OF STUDY		
NUMBER OF YEARS COMPLETED	DID YOU GRADUATE	DIPLOMA OR DEGREE RECEIVED
SCHOOL		
ADDRESS OF SCHOOL, CITY, STATE		
COURSES OF STUDY		
NUMBER OF YEARS COMPLETED	DID YOU GRADUATE	DIPLOMA OR DEGREE RECEIVED
SCHOOL		
ADDRESS OF SCHOOL, CITY, STATE		
COURSES OF STUDY		
NUMBER OF YEARS COMPLETED	DID YOU GRADUATE	DIPLOMA OR DEGREE RECEIVED

**WORK HISTORY**

(List in order, last or current employer first. Account for any gaps in your employment.)

EMPLOYER NAME		POSITION TITLE
EMPLOYER ADDRESS, CITY, STATE		
TELEPHONE NUMBER OF EMPLOYER	DATES EMPLOYED	
SUPERVISOR'S NAME/TITLE	REASON FOR LEAVING	
DESCRIBE IN DETAIL THE WORK YOU PERFORMED (If you need more room to complete your prior work history, use additional sheets of paper)		
EMPLOYER NAME		POSITION TITLE
EMPLOYER ADDRESS, CITY, STATE		
TELEPHONE NUMBER OF EMPLOYER	DATES EMPLOYED	
SUPERVISOR'S NAME/TITLE	REASON FOR LEAVING	
DESCRIBE IN DETAIL THE WORK YOU PERFORMED (If you need more room to complete your prior work history, use additional sheets of paper)		

# WORK HISTORY (continued)

EMPLOYER NAME		POSITION TITLE	
EMPLOYER ADDRESS, CITY, STATE			
TELEPHONE NUMBER OF EMPLOYER		DATES EMPLOYED	
SUPERVISOR'S NAME/TITLE		REASON FOR LEAVING	
DESCRIBE IN DETAIL THE WORK YOU PERFORMED (If you need more room to complete your prior work history, use additional sheets of paper)			
COMMENTS: (Include explanation of any gaps in employment.)			

## MILITARY SERVICE RECORD

Have you ever served in the United States Armed Forces?      YES       NO

List duties in the Service, including special training that is relevant to the position for which you have applied.

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## SKILLS (Summarize job-related skills and qualifications or certifications.)

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Typing: \_\_\_\_\_ w.p.m.      Computer Programs: \_\_\_\_\_

Other Office Equipment: \_\_\_\_\_

Are there any other experiences, skills, or abilities you feel may be helpful to us in considering your application?

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## PERSONAL REFERENCES (Excluding relatives) List two work-related references and one personal reference

NAME		OCCUPATION	
ADDRESS			
DATES KNOWN:		TELEPHONE	
NAME		OCCUPATION	
ADDRESS			
DATES KNOWN:		TELEPHONE	
NAME		OCCUPATION	
ADDRESS			
DATES KNOWN:		TELEPHONE	

*PRE-EMPLOYMENT STATEMENT (Please read carefully and sign the statement below.)*

*I understand that:*

- 1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from TMCC's employment.*
  
- 2. I understand that any offer of employment that I receive from TMCC is contingent upon my successful completion of the college's total pre-employment screening process, including TMCC receiving references that it considers satisfactory.*
  
- 3. If TMCC decides to engage an investigative consumer reporting agency to report on my education or personal history, I authorize it to do so. I understand that it will do so if it has a business-related reason for doing so. If a report is obtained, I understand that upon written request, the name of agency will be provided to me so that I may obtain information regarding the nature and substance of information contained in the report.*
  
- 4. In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of TMCC and understand that my employment and compensation can be terminated with or without cause or notice, at any time, at the option of either TMCC or myself. I further understand that no manager or representative of TMCC, other than the President has the authority to enter into any agreement with me for employment for any specified period of time or to make any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and by the individual designated above.*

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*Signature*

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**Date**