

Mission Township Employment Application



We welcome you as an applicant for the Town of Mission. It is the town’s policy to provide equal opportunity in employment. Please furnish complete information so we may accurately and completely assess your qualifications. You may attach any other information which provides additional details about your qualifications for the position you are seeking. All hires require the approval of the town board before beginning your employment with the town.

Section 1 – Personal Information.

Name (Last)		(First)		(MI)	
Street Address					
City				State	
				Zip	
Phone Number			Email		

Section 2 – Position Applying for employment.

Title of position applying for			
Are you legally eligible to work in the United States? Proof of citizenship or work eligibility will be required as a condition of employment.		Yes	No

Section 3 – Educational Information.

Circle the highest grade completed			
	9 10 11 12 GED	13 14 15 16	Other, please list
	High School	College/Technical	
Did you graduate? Please check	Yes No	Yes No	Yes No
	High School	College/Technical	Other
School Name	Address	Course of Study	Degree
High School:			
College/Technical:			
Other:			

Please list any courses or training you have completed that may provide you with skills related to the position for which you are applying.

Please list any current licenses, registrations, or certificates you possess which may be related to the position for which you are applying.

Section 4 – Employment Experience

Please list your present employment, or if not currently employed, your most recent employment.

Company	Name of last supervisor		Hrs./Week	
Street Address		City	State	Zip
Phone		Last job title		
Reason for leaving				
Describe your basic work duties				
May we contact this employer? Yes No				

Please list your most recent employment prior to the employment listed above.

Company	Name of last supervisor		Hrs./Week	
Street Address		City	State	Zip
Phone		Last job title		
Reason for leaving				
Describe your basic work duties				
May we contact this employer? Yes No				

Please list your most recent employment prior to the employment listed above.

Company	Name of last supervisor		Hrs./Week	
Street Address		City	State	Zip
Phone		Last job title		
Reason for leaving				
Describe your basic work duties				
May we contact this employer? Yes No				

Section 5 – Military Experience

Did you serve in the US Armed Forces? Yes No
You must submit a photocopy of your DD214 or other documentation verifying military service to substantiate the service information requested on this form.

Section 6 – Authorization

I certify that all information I have provided in this application for employment is true and correct 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, will be grounds for dismissal, regardless of length of employment or when the misrepresentation or omission is discovered. I further acknowledge my understanding that employment with the Town of Mission is ‘at will’ and that employment may be terminated by either the town or me at any time, with or without notice. With my signature below, I am providing the town authorization to verify all information I provided within this application, including contacting current or previous employers. However, I understand that if I checked ‘No’ in the Employment Experience section, that employer will not be contacted without my specific authorization. I further understand that criminal history checks may be conducted and that a conviction for a crime related to this position may result in my being rejected for employment. I also understand it is my responsibility to notify the town in writing of any changes to information reported in this application.

Signature	Social Security Number	Date
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Section 7 – Consent for Release of Information.

I understand the town may contact my current and former employers unless I have specifically indicated they may not do so. I also understand that my social security number may be used to conduct a criminal background check and will be used for payroll tax purposes. I further understand that my records are protected under Minnesota and federal privacy regulations and cannot be disclosed without my written consent unless otherwise provided for by law.

Signature	Date
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