



Lincoln Park District
32 McDougall Drive, Lincoln N 58504
lincolndparks@gmail.com

APPLICATION FOR EMPLOYMENT

Position for which you are applying _____ Full-Time Part-Time/Seasonal

Circle Days Available Sun. M T W Th F Sat. If hired, when could you start? _____

Desired Salary _____

PART I

Name _____ E-mail _____

Address _____ City, State, Zip _____

Phone () _____

Have you worked for us before? Yes No If so, when, position held? _____

Are you 18 years or older? Yes No Do you have a legal right to be employed in the U.S.? Yes No

PART II – EDUCATION (High School, College/Trade School)

Name of School, City, State	Course of Study	Degree	Date of Graduation
1. _____	_____	_____	_____
2. _____	_____	_____	_____

PART III - MILITARY

Beginning Date: _____ to _____ Branch: _____

Do you claim Veteran's Preference? No Yes - Must attach DD-214, Report of Separation

Do you claim Disabled Veteran's Preference? No Yes - Must attach DD-214, Report of Separation, and a letter less than one year old from the Veteran's Administration indicating disability

- **Veteran Eligibility:** You must be a North Dakota resident and have served in the active military forces during a period of war or received the armed forces expeditionary or other campaign service medal during an emergency condition, and must have been released under other than dishonorable conditions. See NDCC 37-19.1.

PART IV - WORK EXPERIENCE (List last two jobs held, including your current job)

Company _____ Phone () _____

Supervisor _____ Beginning Date _____ to _____

May we contact your current employer? Yes No If no, please explain: _____

Reason for leaving? _____

Briefly describe work performed

Company _____ Phone () _____

Supervisor _____ Beginning Date _____ to _____

May we contact your current employer? Yes No If no, please explain: _____

Reason for leaving? _____

Briefly describe work performed

PART VII - REFERENCES (persons who can speak of your job/professional qualifications)

Name _____ Relationship _____

Address _____ Phone () _____

City, State _____ Zip _____

Name _____ Relationship _____

Address _____ Phone () _____

City, State _____ Zip _____

PART VIII - GENERAL INFORMATION

Driver's License? Yes No If so, ID number _____ State issued _____ Class _____

Has license been suspended or revoked in the last three years? Yes No If yes, give details: (reason, year, county) _____

Have you ever been convicted of a felony (last 10 years)? Yes No

If yes, answer the following: Year: _____ State Charged: _____ County Charged: _____

Have you ever been convicted of any offense involving a crime against a child? Yes No

If yes, answer the following: Year: _____ State Charged: _____ County Charged: _____

Are there currently any criminal charges pending against you? Yes No

If yes, answer the following: Year: _____ State Charged: _____ County Charged: _____

In case of an emergency, notify:

PART IX - AUTHORIZATION

“BY SIGNING OR TYPING MY NAME BELOW, I CERTIFY THAT ALL FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND AND AGREE THAT ANY MISSTATEMENT WILL BE GROUNDS FOR DISQUALIFICATION OR DISMISSAL FROM EMPLOYMENT BY THE LINCOLN PARK DISTRICT.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, TO INCLUDE A BACKGROUND CHECK AND RELEASE THE BISMARCK PARK DISTRICT OF ANY LIABILITY AND ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION. I UNDERSTAND BY PROVIDING INFORMATION ON THIS APPLICATION THAT THERE IS NO CONTRACTUAL OR IMPLIED AGREEMENT BETWEEN ME AND THE LINCOLN PARK DISTRICT.”

Applicant Signature _____ Date _____

Complete and return application to: Lincoln Park District, 32 McDougall Drive, Lincoln, ND 58504