

EMPLOYMENT EXPERIENCE

(Start with your present or last job. Include Military service assignments & volunteer activities. Please include Street, City, State & Zip Code)

Name of Company and Address (If current employer, may we contact?) <input type="radio"/> Yes <input type="radio"/> No	Telephone ()	Supervisor Name
What Did You Do?	Dates Worked From To	Last Salary/ <input type="radio"/> Hourly Wage \$ <input type="radio"/> Annually
Why Did You Leave?	INTERNAL USE ONLY ➔	VERIFICATION & DATE

Name of Company and Address (May we contact?) <input type="radio"/> Yes <input type="radio"/> No	Telephone ()	Supervisor Name
What Did You Do?	Dates Worked From To	Last Salary/ <input type="radio"/> Hourly Wage \$ <input type="radio"/> Annually
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What Did You Do?	Dates Worked From To	Last Salary/ <input type="radio"/> Hourly Wage \$ <input type="radio"/> Annually
Why Did You Leave?	INTERNAL USE ONLY ➔	VERIFICATION & DATE

REFERENCES

(Please include Street, City, State & Zip Code. DO NOT include family members or significant others.)

Name & Address	Telephone	Years Known
	Area Code ()	
	Area Code ()	
	Area Code ()	

Describe any specialized Education, Training, Skills, or abilities: _____

Name, Phone Number and Address of Person(s) to be notified in an emergency: _____

SIGNATURE, CERTIFICATION, & INFORMATION RELEASE

- I understand that acceptance of employment does not create a contractual obligation upon the employer and that this employment relationship is considered “at will”. This means that you are not required or guaranteed to work for the company for a set period of time and that you are free to terminate your employment at any time and for any reason with or without notice or progressive discipline. The Company is also free to terminate your employment at any time and for any reason with or without notice or progressive discipline.
- I certify that the answers given herein are true and complete to the best of my knowledge and also understand that false or misleading information upon this application will result in my disqualification or discharge from employment.
- I authorize investigation of all statements and references contained in this application for employment as deemed necessary and further grant any former employer and/or government agency to release confidential information about me to the Bois Forte Development Corporation. This release is valid for one (1) year after the date of my signature hereon. A photocopy of this release shall be as valid as the original.

Signature of Applicant _____ Date _____