

Cavalier County, North Dakota **Employment Application**

It is the mission of Cavalier County to be the region's premier employer providing high quality public services in a timely, effective, and efficient manner to the citizens who make up this great community.

Application Instructions

- Complete the application by typing or printing legibly in ink
- Provide detail do not use "see resume"
- Check for errors before submitting
- All parts of the application must be completed. An unsigned application will not be considered
- If accommodations or assistance is needed in completing this application, please see the employing department

Date of Application	Position Applying For				
Name		Phone Number	Emc	Email Address	
Address	City	St	ate	Zip	
eteran's Preference		I			
Branch of Service					
Dates of Service					
To claim preference as a Vet of war or received the arms and must have been release attach a DD-214 and, if app Certificate.	ed forces expeditionary or o	other campaign service morable conditions per NDCC	edal during C 37-19.1. Ir	g an emergency condition on Order to qualify, you must	
Please select which preferen	ce you are claiming:				
Ueteran Disab	led Veteran 🔲 Spouse	of Disabled Veteran 🔲 Sp	oouse of D	eceased Veteran	
ducation and/or Training					
Did you graduate from High	School or receive a GED?	☐ Yes ☐ N	0		
School Name and Location	Field of Study	Did you graduate	? Di	ploma or Degree earned	
		☐ Yes ☐ No			
		☐ Yes ☐ No			
Computer Skills, related volur	nteer experience, and other	☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ No☐ Yes ☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ N			
Computer Skills, related volur	nteer experience, and other	☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ No☐ Yes ☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ N			
Computer Skills, related volur	nteer experience, and other	☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ No☐ Yes ☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ N			
Computer Skills, related volur	nteer experience, and other	☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ No☐ Yes ☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ N			
Computer Skills, related volur	nteer experience, and other	☐ Yes ☐ No☐ Yes ☐ No☐ Yes ☐ No☐ No☐ Yes ☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ N			

Employment History Please start with curre	nt first.				
Employer		Job Title			
Supanisaria Nama	Supervisor's Tolon	hana Numbar	Mayuya contact for a reference?		
Supervisor's Name	Supervisor's Telep	onone Number	May we contact for a reference?		
Dates of Employed	Starting Pay Rate		Ending Pay Rate		
Dates of Employed	Sidning Pay Raie		Litaling Lay Kale		
Reason for Leaving					
-					
Employer		Job Title			
Supervisoria Nama	Supervisor's Tolon	hono Numbor	Mayuya contact for a reference?		
Supervisor's Name	Supervisor's Telep	none number	May we contact for a reference?		
Dates of Employed	Starting Pay Rate		Ending Pay Rate		
Baros of Employed	oraning ray ware		Enailig Fay Naio		
Reason for Leaving		'			
Employer		Job Title			
Supervisoria Nama	Supervisor's Tolon	hono Numbor	May we contact for a reference?		
Supervisor's Name	Supervisor's Telep	none number	Yes No		
Dates of Employed	Starting Pay Rate	,	Ending Pay Rate		
Baros of Employed	oraning ray ware		Enaing Fay Karo		
Reason for Leaving					
Employer		Job Title			
Supervisor's Name	Supervisor's Telep	shone Number	May we contact for a reference?		
Supervisor s Name	rvisor's name Supervisor's Telepr		Yes No		
Dates of Employed	Starting Pay Rate		Ending Pay Rate		
	3 1, 11				
Reason for Leaving					
Employer		Job Title			
Supervisor's Name	Supervisor's Telep	hone Number	May we contact for a reference?		
SUPPLICATION STRUCTION	30001 41301 3 1616b	ALIGHT HOLLIDGE	Yes No		
Dates of Employed	Starting Pay Rate		Ending Pay Rate		
· <i>'</i>	3 2, 22,				
Reason for Leaving					

Professional References Name	Company	Title	Phone
Please indicate valid driver's license he		∐ M	
Are you related to a member of the Co	ounty Commission or a County employee) }	
If yes, whom?			
How did you learn about this oper	ning?		
Salary Desired:			
Date Available:			
If selected: Are you willing to submit to a drug, alc Yes No	ohol, and background screening?		
Are you able to provide proof you are Yes No	eligible to work in the United States?		
Are you capable of performing, with a Please see position description found v	or without reasonable accommodation, to with the job posting.	he essential functions of the jo	b for which you are applying?
Signature Disclaimer			
knowledge. I understand that a interview process will cause for rejall statements made on this applic verify the information that is obta receiving such information. I fudocuments are not contracts of elements.	ained in this application and my attach iny willful misrepresentation, false staten ection of my application or termination cation and any attachments. I authorize ined. I release all persons, companies, in orther understand that this employment imployment; and, that any oral or written mation provided is subject to the North D	nent, or omission by me in the of my employment. I authorize Cavalier County to contact my and organizations from liability application and other emp statements to the contrary are	e application or e investigation of references and r for providing or loyment related
**A typed name is considered a signat	ure.		
Signature**		Date	

Equal Opportunity Employer

Cavalier County does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or the provision of service, and complies with the provisions of the North Dakota Human Rights Act.

EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE Cavalier County

Cavalier County is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the County invites you to voluntarily self-identify your race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatments. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to the summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

This form <u>will not</u> be part of your application file or included in the documentation provided to the selecting official.

Please Prir	nt or Type							
Full Name	e			Date				
Position A	pplying for			Birthdat	te			
Gender	Male 🗌	Female						
Hispanic Culture White (1	or origin rego Not Hispanic	A person of Cu ardless of race. or Latino) – A p	ban, Mexican, Puerto F erson having origins in					·
☐ Black o	North Africa. or African Am of Africa.		panic or Latino) – A pe	rson havir	ng o	rigins in ar	ny of the black ra	cial
			ander (Not Hispanic or or other Pacific Islands	_	Ар	erson havi	ing origins in any	of the
Southed	ast Asia, or th	e Indian Subcc	erson having origins in ontinent, including, for e ands, Thailand, and Vi	example,		-		
people		d South Americ	(Not Hispanic or Latino) a (including Central Al					-
Two or I	More Races (Not Hispanic o	r Latino) – All persons w	ho identit	fy wi	th more th	nan one of the ak	oove five
☐ I do not	wish to discl	ose.						
-		of this job openi wspaper, emplo	ng? oyment agency, organ	ization, a	gen	cy employ	yee, or other sour	ce):
Your Home	Address							
City						State	Zip Code	