

Special Olympics North Dakota Application for Employment

**PLEASE PRINT
Personal Information**

Today's Date _____

Name _____
Last
First
MI

Present Address _____
Address/PO Box
City
State
Zip

Permanent Address _____
Address/PO Box
City
State
Zip

Home # _____ Work # _____

E-mail address _____

EMPLOYMENT DESIRED

Position: _____ Earliest Start Date: _____ Salary Desired: _____

Referred by: _____ Are you over 21? (for gaming purposes only) _____

Have you ever been employed by or applied for Special Olympics? _____ If yes, when? _____

WORK EXPERIENCE

Account for all employment since high school or last ten years, whichever is less, with most recent experience first.

From Mo/Yr	To Mo/Yr	Company Address/ Supervisor	Principal Duties	Salary Beg.	Salary End	Reason for Leaving

Are you presently employed? _____ If yes, may we contact your present employer? _____

Please summarize any other work history you may have: _____

EDUCATION/TRAINING

CIRCLE HIGHEST GRADE Completed: 7 8 9 10 11 12 GED 13 14 15 16 17 18

Name of School	Course of Study	Degree or Certificate and date received
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any other qualifications which should be considered; _____

PERSONAL REFERENCES

Please give the name, address, telephone numbers and the number of years known of three personal references, other than a relative or employer.

Name	Address	Phone #	Years Known

EMPLOYEE RESPONSIBILITY TO SPECIAL OLYMPICS NORTH DAKOTA. (Please read before signing.)

As a condition of my employment, I accept the principle that the welfare of Special Olympics North Dakota depends upon the conduct and honesty of the members of the staff and upon the trust and confidence of the public. Our customers rightly expect honesty, security and confidentiality in their affairs. I therefore agree to the following:

1. I agree to give no unauthorized information relative to the accounts of Special Olympics North Dakota or its relation with others, and to discuss no matters of a confidential nature relating to Special Olympics North Dakota or its relation with others, and to discuss no matters of a confidential nature relating to Special Olympics North Dakota's affairs unless such discussion is in the necessary course of Special Olympics North Dakota's business and is in accordance with Special Olympics North Dakota's policy.
2. I also agree to inform the management of Special Olympics North Dakota, without delay, of any fraud, false entry, substantial error, embezzlement or employee misconduct, which I discover or know to have taken place in any records, property or funds of Special Olympics North Dakota, and report any transaction or matter that seems damaging to Special Olympics North Dakota.
3. In the event of my employment with Special Olympics North Dakota, I will comply with all the rules and regulations as set forth in the Special Olympics North Dakota policy manual or other communications distributed to all staff members.

I acknowledge and understand that any violation of the Agreement may result in the termination of my employment.

 Name Signature Date

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release all parties from all liability for any damage that my result from furnishing the same to you.

If hired, I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at the option of either Special Olympics North Dakota or myself. This is not a contract of employment. I further understand and agree that any employment will be at the sole discretion of Special Olympics North Dakota.

Signature _____ Date _____

FOR OFFICE USE ONLY

Interviewed by: _____ Date _____

Comments: _____

Hired: Yes _____ No _____ Position _____

Date reporting to work: _____ Starting salary _____

Date of first evaluation: _____ Pay Increase: _____

Approved by: _____ Title _____ Date _____