

## **The Arc of Cass County Employment Application**

Position Applied For \_\_\_\_\_ Date \_\_\_\_\_

How did you learn of this position? \_\_\_\_\_

Name \_\_\_\_\_  
(First) (Middle) (Last)

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Do you have reliable transportation to get to work? Yes No

Do you have a valid driver's license? Yes No

Are you legally authorized to work in the United States? Yes No

How many hours per week are you looking for? \_\_\_\_\_

What is your availability between 9am-8pm? (every other weekend required)

Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday

Date Available to Start: \_\_\_\_\_ Acceptable Wage: \_\_\_\_\_

Have you ever been convicted of a crime or any other violation of the law (besides traffic violations)? If so, explain.

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been dismissed, suspended, or allowed to resign for cause? If so, explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Education

Name & Location	# Years Completed	Degree & Date	Major
High School			
College/Other			

### Employment History

Company	Dates	Position	Supervisor & Phone #	Reason for Leaving	May we contact?

Explain any gaps in your employment history.

---

---

### References

Please list the name and contact information for three people who can provide a reference on your behalf. References should not be a relative. **Former coworkers are acceptable.**

Name	Relationship to Applicant	Email Address & Phone #

I hereby affirm that the information above is true and correct. I understand that if employed, falsified information on this application shall be considered sufficient cause for dismissal. I consent to the release of any and all information as may be requested by The Arc of Cass County of the individuals and organizations listed in this application with the exception of those marked "no" under Employment History. Additionally, I understand that in the event of employment, I am expected to follow policies and procedures of The Arc of Cass County.

---

Signature of Applicant

Date

### **NOTIFICATION OF BACKGROUND CHECK**

(Please read and sign this form in the space provided below. Your written authorization is necessary for completion of the application process.)

I, \_\_\_\_\_, hereby authorize The Arc of Cass County to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that The Arc of Cass County will utilize an outside firm or firms to assist it in checking such information, if scheduled for an interview. I specifically authorize such investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done.

I am also aware that any employment is contingent upon the findings of a background check. I have agreed to a background check and know that the results of the inquiry may lead to disqualification from employment.

The following sources may be used to perform a background check:

- ND Courts
- MN Courts
- National Criminal Records Search
- DMV Records
- National Want & Warrants

By signing below, I am consenting to the review of federal and state criminal history records systems, as well as civil child abuse and neglect registries.

---

Signature of Applicant

Date