

## APPLICATION FOR EMPLOYMENT First District Health Unit 801 11<sup>th</sup> Ave SW Minot, ND 58701 701-852-1376 www.fdhu.org



Revised April 2021

Attach a résumé and a list of 3 professional references that you've known at least 1 yr.

We are an equal opportunity employment agency. We are dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion, national origin or physical handicap.

Home Phone  Cell Number  Email Address  Are you legally authorized or permitted to work in the US?  Are you a Veteran as defined  Are you a disabled Veteran as  If yes, please include requires	Legal Name (First, Middle I	nitial, Last)				Referred by	
Are you legally authorized or permitted to work in the US?  Are you at least 18 years old? Have you ever been convicted a crime?  Are you a Veteran as defined in NDCC 37-19-1? documentation for applying for Veteran's preference.  EMPLOYMENT DESIRED  Position  Date available Minimum hourly pay rate you a willing to accept  Desired types of employment: Full time Part time Temporary  Are you employed now? May we inquire of your present employer? What was your reason for leaving your last employment?  Have you ever worked for First District Health Unit? Yes No If yes, when?  Do you have any relatives currently employed by First District Health Unit? Yes No Do you have any relationships or situations that may cause a potential conflict of interest? (This could be association with a business, policy maker or family member.) Yes No Please list volunteer activities, community affiliations, organizational memberships or	Present Address					Highest level of education completed	
Are you a Veteran as defined in NDCC 37-19-1?   Ves/No	Home Phone	Cell Number		Email Address			
defined in NDCC 37-19-1? documentation for applying for Yes/No			st 18 y	ears old?		-	
Date available   Minimum hourly pay rate you a willing to accept    Desired types of employment: Full time   Part time   Temporary    Are you employed now? May we inquire of your present employer? What was your reason for leaving your last employment?    Have you ever worked for First District Health Unit? Yes No If yes, when?    Do you have any relatives currently employed by First District Health Unit? Yes No    Do you have any relationships or situations that may cause a potential conflict of interest? (This could be association with a business, policy maker or family member.) Yes No    Please list volunteer activities, community affiliations, organizational memberships or	in NDCC 37-19.1?	CC 37-19.1? defined in NDCC 37-19-1?				If yes, please include require documentation for applying for Veteran's preference.	
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Employment History for last	5 years		
Name of Employer	Position	Location (city)	Dates of employmer
se write, not type:	_		
My knowledge and understandi	ing of First District H	Health Unit:	
What about this position int	terests vou?		
what about this position in			
Skills and abilities I can b	oring to this position:	:	
understand that if employed			
pplication is cause for dismequest drug testing.	itssat. I understand b	יטחט may run a backgrou.	inu or crealt check o
ATURE OF APPLICANT			DATE