

# EAST CENTRAL CENTER FOR EXCEPTIONAL CHILDREN

## Member Schools:

Carrington      New Rockford-Sheyenne      Fessenden-Bowdon  
Oberon      Kensal      Pingree-Buchanan

**Ashly Wolsky**  
**Director**  
16 South 8<sup>th</sup> Street  
New Rockford, ND 58356-1520  
701-947-5015 (Office) 701-947-5110 (Fax)  
ashly.wolsky@k12.nd.us

**Susette Allmaras**  
**Business Manager**  
16 South 8<sup>th</sup> Street  
New Rockford, ND 58356-1520  
701-947-5015 (Office) 701-947-5110 (Fax)  
suzette.allmaras@k12.nd.us

## APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, national origin, gender or disability.

(PLEASE PRINT OR TYPE)

Position(s) Applied For		Date of Application
Last Name	First Name	Middle Name
Address:		
City:	State:	Zip:
Telephone Number(s):		
Email address:		

Best Time to Contact you at home is

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 a.m. p.m.

Have you ever filed an application with us before?

Yes ☐ No ☐

If yes, give a date:

Have you ever been employed with us before?

Yes ☐ No ☐

If yes, give a date:

Are you currently employed?

Yes ☐ No ☐

May we contact your present employer?

Yes ☐ No ☐

Supervisor's Name and Phone Number:

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes ☐ No ☐

(Proof of citizenship or immigration status will be required upon employment)

Do you qualify for Veteran's Preference?

Yes ☐ No ☐

(If yes, please provide a copy of your certificate.)

Have you ever been convicted of a felony or been listed on a sexual offender's list?

Yes ☐ No ☐

Do you have any pending criminal charges against you?

Yes ☐ No ☐

Date available for work: [Click here to enter a date.](#)

## EDUCATION

School	Name and Address of School	Course of Study	Year Completed	Diploma or Degree Received
High School				
Undergraduate/ Technical School				
Graduate/ Professional				
Other (Specify)				

**Work Experience:** Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed From/ To	Work Performed	
Address			
Telephone Number(s)	Hourly Rates/ Salary Starting   Final		
Starting/Present Job Title			
Supervisor			
Reason for Leaving		May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Dates Employed From/ To	Work Performed	
Address			
Telephone Number(s)	Hourly Rates/ Salary Starting   Final		
Starting/Present Job Title			
Supervisor			
Reason for Leaving		May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Dates Employed From/ To	Work Performed	
Address			
Telephone Number(s)	Hourly Rates/ Salary Starting   Final		
Starting/Present Job Title			

Supervisor	
Reason for Leaving	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Comments: Include explanation of any gaps in employment.

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Describe any specialized training, apprenticeship, job related skills, military training, professional, trade, or business activities.

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State any additional information you feel may be helpful to us in considering your application.

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Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

☐ Yes ☐ No

### Personal /Professional References

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

## **Applicant's Statement**

I certify that answers given herein are true and complete.

I agree to a background check to be completed by the North Dakota Bureau of Criminal Investigation if I am offered this job.

Yes ☐ No ☐

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by a written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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Signature of Applicant

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Date