

Application for Employment

Great River Rescue

1612 Carr Lake Road SE

Bemidji, MN 56601

218-751-7910

www.greatriverrescue.com

PERSONAL INFORMATION

Name (First and Last)		Today's Date	
Present Address	City	State	Zip Code
Permanent Address	City	State	Zip Code
Primary Phone Number	Alternate Phone Number	Referred By	
Are you related to anyone currently employed at GRR? <input type="checkbox"/> Yes <input type="checkbox"/> No			

EMPLOYMENT DESIRED

Position	Date you can start:		
Are you Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where/Supervisor	May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Why are you interested in working at GRR?			

EDUCATION HISTORY

Name and Location of School	Years Attended	Did you graduate?	What year?	Subjects Studied
High School				
College				
Other				

GENERAL INFORMATION

Subjects of Special Study/Research Work or Special Training Skills
List Your Related Volunteer Experiences Along with Description of your Duties

List any prior experience you have with companion animals

List any allergies you may have relating to companion animals

US Military Service/Branch	Rank	Dates Served	Special Duties/Skills

FORMER EMPLOYERS(List below last three employers, starting with the last one first)

Date (mo/yr)	Name, Address and Phone of Employer	Position/Duties	Reason for Leaving
From:			
To:			
From:			
To:			
From:			
To:			

REFERENCES- Give below the names of three people NOT related to you whom you have known at least one year. At least one of these people should be a former employer if possible.

Name	Address	Phone Number	Years Known

AUTHORIZATION

"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 and employers 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 the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

CONFIDENTIALITY AGREEMENT

This confidentiality agreement is required for the protection of Great River Rescue and in recognition that employees/volunteers/board members of Great River Rescue may either acquire or observe documents, or overhear conversations, or information that is private and confidential in nature.

Accordingly, the undersigned employee/volunteer/board member agrees that if he or she comes into possession of either written or oral information of any kind about Great River Rescue, its employees/volunteers/board members, or clients as the result of employment/volunteer/board work with Great River Rescue, the undersigned agrees to keep all such information confidential and not disclose or publish this information to any person unless expressly permitted in writing by the Great River Rescue executive director.

It is acknowledged that this agreement is not only for the protection of Great River Rescue and its clients regarding their confidential information but the agreement is also a reminder to the undersigned that inappropriate disclosure of such information by the undersigned could expose the undersigned to liability or claims if the disclosure of such information cause either monetary damage or other irreparable harm to Great River Rescue or its clients.

By signing below I agree to above Authorization and Confidentiality Agreement

Date _____ Signature _____

Interviewed by _____

DO NOT WRITE BELOW THIS LINE

Remarks

Hired	Position	Date to Start	Salary/Wages