

APPLICATION FOR EMPLOYMENT
CANADIAN BORDER OUTFITTERS
 14635 Canadian Border Road Ely, MN 55731
 (218)365-5847 800-247-7530 Fax (218) 365-5847

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Last Name	First Name	Middle Name
Address	City	State
		Zip Code
Telephone Number	Driver's License Number and State	Email address

- If you are under 18 years of age, can you provide required proof of your eligibility to work? YES NO
- Have you ever filed an application with us before? If yes, give date _____ YES NO
- Have you ever been employed with us before? If yes, give dates _____ YES NO
- Are you currently employed? YES NO
- May we contact your present employer? YES NO
- Are you prevented from lawfully becoming employed in this country because of visa or immigration status? (Proof of citizenship or immigration status will be required upon employment.) YES NO
- What date can you start? _____ What date can you work until? _____
- Are you currently on "lay-off" status and subject to recall? YES NO
- Can you travel if a job requires it? YES NO
- Have you been convicted of a felony within the last 7 years? (Convictions will not necessarily disqualify an applicant) YES NO
- If yes, please explain _____
- I understand I may be operating commercial vans and/or tow boats, and I will be available for random drug/alcohol testing. YES NO

EDUCATION

What is the highest grade you completed? _____ Diploma/Degree Received _____

Area of Study _____

Describe any specialized training, apprenticeship, skills, extra-curricular activities, professional trade, business or civic activities and offices held.

EMPLOYMENT EXPERIENCE

Employer	Dates Employed:	Starting Salary	Final Salary	Work Performed
Address		Telephone Number		
Job Title		Supervisor		
Reason for Leaving				
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Address		Telephone Number		
Job Title		Supervisor		
Reason for Leaving				

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 for which you have applied? A description of the activities involved in such a job is attached.

YES NO

How did you learn about us?

Referral Website Ely Chamber of Commerce Job Fair Other (Please Explain) _____

REFERENCES

Name	Phone Number with Area Code
Name	Phone Number with Area Code
Name	Phone Number with Area Code

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

The 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 applicable 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 any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this 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 regulation of the employer.

Signature of Applicant: _____

Date: _____