



Attention: Human Resources
 200 SW 4th St.
 P O Box 1359; Willmar, MN 56201

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, gender, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status. United Community Action Partnership will provide reasonable accommodations for qualified individuals with disabilities. A Reasonable Accommodation Request form must be requested from the Human Resources Department/ADA Compliance Officer by calling 1-800-992-1710 or 320-235-0850.

(PLEASE PRINT)

Position(s) Applying For:	Date of Application:
How Did You Learn About Us?	
<input type="checkbox"/> United Employee	<input type="checkbox"/> Minnesota Works JOB ID #: _____
<input type="checkbox"/> Friend	<input type="checkbox"/> Walk In
<input type="checkbox"/> Relative	<input type="checkbox"/> Early Childhood Job Center
<input type="checkbox"/> Newspaper (Please list name) : _____	<input type="checkbox"/> Indeed.com
	<input type="checkbox"/> Other _____

Last Name:	First Name:	Middle Name:	
Address	City	State	Zip
Telephone Number(s):		Email:	

Have you ever been employed with us before?
 Yes
 No
 If yes, Date(s) of employment: _____
 Job title: _____

Are you a past/present Head Start participant parent or guardian?
 Yes
 No

Have you ever had any job related training in the United States Military?
 Yes
 No

Education

	<i>High School</i>				<i>Undergraduate College/University</i>				<i>Graduate/ Professional</i>			
<i>School Name and Location</i>												
<i>Years Completed</i>	<i>9</i>	<i>10</i>	<i>11</i>	<i>12</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>
<i>Diploma/GED/Degree</i>												
<i>Describe Course of Study</i>												
<i>Describe any special training, apprentice, skills and extracurricular activities that relate to the position for which you are applying.</i>												
<i>Describe any honors you have received.</i>												

<i>Indicate any foreign languages you can speak, read and/or write.</i>			
	<i>FLUENT</i>	<i>GOOD</i>	<i>FAIR</i>
<i>SPEAK</i>			
<i>READ</i>			
<i>WRITE</i>			

<i>List professional, trade, business or civic activities and office held. You may exclude memberships which would reveal gender, race, religion, national origin, age, ancestry, or handicap or other protected status.</i>

References

Give the name, title, address and telephone number of three (3) Professional references (who are not related to you). If you don't have professional references, please give the name, title, address and telephone number of three (3) Personal references (not related to you).

Employment 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, handicap or other protected status. Please fill in application completely; do not say "See Resume." If you have had more employers, please attach additional sheets filled in with the required information asked for below. Please feel free to copy pages 4 or 5 to fill in the necessary information on past employers.

Employer #1:	
Address:	Telephone Number(s):
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates employed:	
Job Title:	
Supervisor:	
Hourly Rate/Salary: Starting:	Final:

Reason for Leaving:
Work Performed:

Employer #2:	
Address:	Telephone Number(s):
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates employed:	
Job Title:	
Supervisor:	
Hourly Rate/Salary: Starting:	Final:
Reason for Leaving:	
Work Performed:	

Employer 3:	
Address:	Telephone Number(s):
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Dates employed:	
Job Title:	
Supervisor:	
Hourly Rate/Salary: Starting:	Final:
Reason for Leaving:	
Work Performed:	

Employer #4:	
Address:	Telephone Number(s):
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates employed:	
Job Title:	
Supervisor:	
Hourly Rate/Salary: Starting:	Final:
Reason for Leaving:	
Work Performed:	

Applicant's Statement

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

I approve of an investigation of all statements contained in this application for employment which may be necessary to arrive at an employment decision. I understand that United Community Action Partnership does criminal background checks after a conditional offer of employment and that if a conviction is found, it will not necessarily disqualify me from employment at the Partnership.

I also understand and acknowledge that, unless defined differently 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 the employee at any time with or without cause. I also understand that this "at will" employment relationship may not be changed by any written document or by any conduct unless that change is specifically acknowledged in writing by an authorized executive.

I understand that my records are protected under State and Federal confidentiality regulations and cannot be disclosed without my written consent unless otherwise provided for in the regulations. I also understand that I may revoke this consent at any time and that in any event this consent expires in one year from the date signed.

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

Signature of Applicant

Date



REASONABLE ACCOMMODATIONS EMPLOYMENT POLICY

For
Job Applicants

VOLUNTARY

United Community Action Partnership considers applicants for employment without regard to race, color, religion, gender, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status. United Community Action Partnership will provide reasonable accommodation for qualified individuals with disabilities.

United Community Action Partnership is committed to fair and equal employment of people with disabilities. Reasonable accommodation is the key to this nondiscrimination policy. United Community Action Partnership will reasonably accommodate qualified individuals with disabilities unless the accommodation would impose an undue hardship. The policy applies to all job applicants, employees, and employees seeking promotional opportunities.

Please check the appropriate box below:

- I have read the above and **I am requesting** accommodation for a disability in my application for employment with United Community Action Partnership

- I have read the above and **I am not requesting** accommodation for a disability in my application for employment with United Community Action Partnership

Position Applied For: _____

Date: _____

Name: _____



Attention: Human Resource Department
 200 SW 4th St.
 PO Box 1359; Willmar, MN 56201

An Equal Opportunity, Affirmative Action Employer

Employment Data Record

During employment, employees are treated without regard to race, color, religion, gender, sexual orientation, national origin, age, marital or veteran status, medical condition or handicap, sexual preference or any other legally protected status.

As an employer with an Affirmative Action Program, we comply with government regulations, including Affirmative Action responsibilities where they apply.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. It is not used for any other purpose. The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Data Records are kept in a Confidential File and are not a part of your Application for Employment or personnel file.

PLEASE NOTE: YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.

VOLUNTARY SURVEY

Date: _____

Government agencies at times require periodic reports on the gender, ethnicity, handicap, veteran and other protected statuses of employees. This data is for statistical analysis with respect to the success of the Affirmative Action program.

SUBMISSION OF THIS INFORMATION IS VOLUNTARY AND WILL NOT AFFECT EMPLOYMENT DECISIONS.

If you wish to mail this form separately from your application, please send it to the above address. Thank you.

Applicant's Name (optional):
Position applied for:
If currently employed by United, please list your current job:
Check one: <input type="checkbox"/> Male <input type="checkbox"/> Female
Check one of the following: (Ethnic Origin)
<input type="checkbox"/> White <input type="checkbox"/> Latino or Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Multicultural Minority (you identify as more than one race)
Are you a person with a Disability? <input type="checkbox"/> Yes <input type="checkbox"/> No
Check if any of the following apply: <input type="checkbox"/> Vietnam Era Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Disabled Individual