



Dovre Import Application for Employment

Position applied for _____ Date available _____

Last name _____ First name(s) _____

Street address _____ City _____ State/Province _____ Zip/Postal code _____

Telephone (include area code) _____ Fax _____ E-mail _____

Are you applying for: Full time Part time Temporary

Hours available: Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun NA

Work experience (Please list most recent first)

1 Position _____ Dates of employment _____
 Employer _____ Address _____
 Supervisor _____ Telephone _____ E-mail _____
 Beginning pay _____ Ending pay _____
 Reason for leaving _____ May we contact this employer? Yes No
 Responsibilities _____

2 Position _____ Dates of employment _____
 Employer _____ Address _____
 Supervisor _____ Telephone _____ E-mail _____
 Beginning pay _____ Ending pay _____
 Reason for leaving _____ May we contact this employer? Yes No
 Responsibilities _____

3 Position _____ Dates of employment _____
 Employer _____ Address _____
 Supervisor _____ Telephone _____ E-mail _____
 Beginning pay _____ Ending pay _____
 Reason for leaving _____ May we contact this employer? Yes No
 Responsibilities _____

List other relevant work experience _____

Education/training

List secondary and postsecondary education including course of study, and degree or diploma received (highest level achieved first)

List other relevant training (most recent first)

Other activities

List volunteer work, leadership positions, or other activities that you feel may be relevant to this application

Personal references

Please provide three reference contacts other than family members or people you have previously worked with

Name	Telephone	Occupation

Is there anything else you would like to tell us about yourself?

I certify that all information provided in this application is accurate and complete to the best of my knowledge, and I understand that intentionally providing false information could result in refusal of employment or discharge. I also authorize the employers, schools, organizations, or persons named above to provide information regarding my employment, education, character, and qualifications.

Signature _____ Date _____