



614 SOUTH THIRD STREET | MINNEAPOLIS, MN 55415 | 612.332.4500

EMPLOYMENT APPLICATION

Please Answer All Questions. Resumes Are Not A Substitute For A Completed Application.

We are an equal opportunity employer. Applicants are considered for positions without regard to race, color, creed, religion, national origin, sex, sexual orientation, disability, age, marital status, membership or activity in a local human rights commission, status with regard to public assistance, or any other category protected by applicable federal, state or local laws. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

PERSONAL INFORMATION

Name	Phone	Alternate or Cellular Phone Number	
Address	City	State	Zip
Email Address	Position Applied For		

If applicable, list below any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

EMPLOYER INFORMATION

How did you hear about People Serving People?	Desired Salary/Hourly Rate
<input type="checkbox"/> Yes <input type="checkbox"/> No	If under the age of 18, can you produce the necessary work certificate at the time of employment?
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Type of employment desired? (Specify Hours) _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you willing to work overtime?
_____	Date on which you can start work if hired.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you previously applied for employment with People Serving People? If Yes, when? _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been employed by People Serving People? If Yes, provide dates of employment, location, and reason for separation from employment: _____ _____



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SKILLS

List all special skills or licenses that you feel qualify you for the job for which you are applying (For example, teaching license, equipment operation, special tools or machines, etc.): _____

EDUCATION

High School Name and Location (Address, City, State)	Course of Study	Graduate?	#of Years Completed	Degree/Major
College Name and Location (Address, City, State)	Course of Study	Graduate?	#of Years Completed	Degree/Major
Bus./Tech./Trade or Post College Name & Loc. (Add., City, State)	Course of Study	Graduate?	#of Years Completed	Degree/Major

Honors Received _____

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

Reference 1 Name	Reference 1 Position	Reference 1 Company	Reference 1 Work Relationship	Reference 1 Phone
Reference 2 Name	Reference 2 Position	Reference 2 Company	Reference 2 Work Relationship	Reference 2 Phone

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

Reference 3 Name	Reference 3 Occupation	Reference 3 Address	Reference 3 Phone	Reference 3 Years Known
Reference 4 Name	Reference 4 Occupation	Reference 4 Address	Reference 4 Phone	Reference 4 Years Known



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WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for all periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration for employment.

Employer Name and Location (Address, City, State)	Type of Business	Job Title
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Employer Telephone	Date Employed From	Date Employed To	Supervisor's Name
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Duties	May we contact employer/supervisor	If not, why?
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Starting Wages	Final Wages	Reason for Leaving
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What will this employer say was the reason for your employment terminated?	How much notice did you give when resigning?	If none, explain
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Employer Name and Location (Address, City, State)	Type of Business	Job Title
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WORK EXPERIENCE (continued)

Please explain fully all gaps in your employment in excess of one month.

Have you ever been terminated or asked to resign from any job?

- Yes No Have you ever been terminated or asked to resign from any job
- Yes No Has your employment ever been terminated by mutual agreement?
- Yes No Have you ever been given the choice to resign rather than be terminated?

If you answered Yes to any of the above three questions, please explain the circumstances of each occasion.

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid Minnesota driver's license and automobile liability insurance.

I understand that People Serving People is a drug-free workplace. I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn.

If employed by People Serving People, I understand and agree that People Serving People, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I certify that all of the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

PEOPLE SERVING PEOPLE (PSP) IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, PEOPLE SERVING PEOPLE OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITER OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF PEOPLE SERVING PEOPLE IS AUTHORIZED TO ENTER INTO AN AGREEMENT—EXPRESSED OR IMPLIED—WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF PEOPLE SERVING PEOPLE.



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IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF PEOPLE SERVING PEOPLE, AND I UNDERSTAND THAT PEOPLE SERVING PEOPLE HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize People Serving People or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state or local law. I agree to complete any requisite authorization forms for the criminal background investigation. I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state and local law, any party delivering information to People Serving People or its duly authorized representative pursuant to this authorization from any liability, claims, charges or causes of action which I may have as a result of the delivery of the disclosure of the above requested information. I hereby release from liability People Serving People and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information. If hired by People Serving People, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by People Serving People. I also understand that People Serving People employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY. I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

Applicant Signature

Date

If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that People Serving People, to the extent permitted by federal, state and local law, can test the applicant for illegal or controlled substances, conduct inspections of property without notice, and communicate test results to People Serving People personnel who need to know, the applicant, and the applicant's legal guardian.

Parent/Legal Guardian Witness

Date

EEO-1 Self-Identification Form

The employer is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites employees to voluntarily self-identify their race and ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

(If also a federal contractor/subcontractor – add this clause): As employers/government contractors, we also comply with government regulations including but not limited to affirmative action responsibilities as required under Executive Order 11246, Section 503 of the Rehabilitation Act of 1973, section 4212 of the Vietnam Era Veterans Readjustment Act of 1974 and Veterans Employment Opportunities Act (VEOA) of 1998.

This data is for periodic government reporting and will be kept in a **Confidential File** separate from the Application for Employment.

(PLEASE PRINT)

Date: _____

Position(s) Applied For _____

Referral Sources: Advertisement Friend Relative Walk-In
 Employment Agency Company Website Other

Name _____ Phone () _____
 LAST FIRST MIDDLE

Address _____
 NUMBER STREET CITY STATE ZIP CODE

EEO-1 Survey

If you wish to be identified, please sign below and complete the survey:

Signed: _____

Check one: Male Female

{Please Finish Survey on Back of Page}

EEO-1 Survey (Continued)

Ethnicity:

Are you Hispanic or Latino?

- No, I am **not Hispanic or Latino**.
- Yes, I am **Hispanic or Latino**: A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, regardless of race.

Race – IMPORTANT - Only complete this section if you checked “No, I am not Hispanic or Latino” in the Ethnicity section above:

What is your race? Select **ONE** of the following categorie(s):

- White** – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black or African American** – A person having origins in any of the Black racial groups of Africa.
- American Indian/Alaskan Native** A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian**– A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Two or More Races** – All persons who identify with more than one of the above five *rac*es.

(If federal contractor/subcontractor with affirmative action obligations – add the following section) Check if the following is applicable:

- Veteran** - As defined under one or more of the following:
- served on active duty for a period of more than 180 days, and any part of which occurred between August 5, 1964 and May 7, 1975 and were discharged or released other than dishonorably; or,
 - was discharged or released from active duty for a service connected disability if any part of the active duty was performed between August 5, 1964 and May 7, 1975; or
 - who served on active duty in the U.S. military, ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge has been authorized (such as The Persian Gulf, El Salvador, Grenada, Lebanon, Panama, Southwest Asia, Haiti, Somalia & Bosnia); or
 - one who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of discharge or release from active duty (recently separated veteran).

FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For Is Open: Yes No

Position(s) Considered For: _____ Date _____
