

APPLICATION FOR EMPLOYMENT

After you have completed the form,
please fax (701) 237-9082
or mail to:

Brandt Holdings

PO Box 230
Fargo ND 58107

Thank you!

EMPLOYMENT HISTORY

Present or most recent Employer	Your Job Title	Last Salary	Reason for Leaving
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Address:	Your Duties	Date Began:
Street		Month
City		Year
State		Date Left:
Zip Code		Month
Supervisor's name:		Year
Supervisor's phone #:		May we contact? Yes No

Previous Employer	Your Job Title	Last Salary	Reason for Leaving
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Address:	Your Duties	Date Began:
Street		Month
City		Year
State		Date Left:
Zip Code		Month
Supervisor's name:		Year
Supervisor's phone #:		May we contact? Yes No

Previous Employer	Your Job Title	Last Salary	Reason for Leaving
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Address:	Your Duties	Date Began:
Street		Month
City		Year
State		Date Left:
Zip Code		Month
Supervisor's name:		Year
Supervisor's phone #:		May we contact? Yes No

Previous Employer	Your Job Title	Last Salary	Reason for Leaving
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Address:	Your Duties	Date Began:
Street		Month
City		Year
State		Date Left:
Zip Code		Month
Supervisor's name:		Year
Supervisor's phone #:		May we contact? Yes No

REFERENCES

(Do not list relatives)

Name	Address	Telephone Number(s)
Occupation		

Name	Address	Telephone Number(s)
Occupation		

Name	Address	Telephone Number(s)
Occupation		

Name	Address	Telephone Number(s)
Occupation		

How did you find out about our company and job opening(s)? _____

APPLICANT'S STATEMENT**Read carefully before signing!**

I hereby give this Company the right to investigate my past employment, education, and activities. I release from all liability all persons, companies, and corporations who supply such information. I indemnify the Company against liability that might result from such an investigation. I understand that any false answer or statements or implications I might make in this application or in any other required document shall be considered sufficient cause to deny employment or for discharge if already employed. I verify that I am eligible to work in the United States.

I also understand that nothing contained in this application or in the granting of an interview is intended to create an employment contract between the Company and myself for employment or for any benefit. I have received no promise regarding employment, and I understand that no such guarantee is binding on the Company. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that the Company has similar rights.

If hired by this Company, prior to my first day of work I will be required to verify that I am either a U.S. citizen or a legal resident foreign national.

Applicant's Signature: _____ **Date:** _____

FOR HUMAN RESOURCES OR SUPERVISOR USE ONLY:

Employment offer made? Yes No

Employment offer accepted? Yes No

Starting date: _____

Starting salary: _____

Position title: _____

Department: _____

Equal Employment Opportunity Commission Compliance Form

Applicants are considered for all positions, and employees are treated during employment, without regard to race, color, religion, sex, national origin, age, marital or veteran status, or disability.

In order to comply with laws that require us to provide statistics on applicants for employment, we request that you complete the following. Your completion of this form is **voluntary** and the information provided will not be used or reviewed as part of your employment application. This form will be separated from your application prior to consideration for a position.

PLEASE PRINT

Name: _____

Date: _____ Position(s) Applied For: _____

How did you learn of this opening? _____

Government agencies require periodic reports on the sex, ethnicity, disability and veteran status of applicants. This data is for analysis and EEO purposes only. **Submission of any information is voluntary.**

Are you.....

DISABLED: Defined as:

1. having a physical or mental impairment which substantially limits one or more life activities;
2. having a record of such impairment; or
3. being regarded as having such an impairment.

_____ Yes _____ No

VETERAN: _____ Yes _____ No

VIETNAM VETERAN: _____ Yes _____ No

GENDER: _____ Male _____ Female

RACE (Check One):

_____ White _____ Black _____ Hispanic

_____ American Indian/Alaskan Native _____ Asian/Pacific Islander

Equal Opportunity Employer