+ At	SSOUNY VALLEY - WESTERN RALMOND		Date	2			
.)	PERSONAL INFO						
	Full Name	Social Security Number					
	Mailing Address		City	StateZ	ip		
	Phone NumberSecondary Phone						
	Emergency Contact						
	Are you at least 18 years of ag	e? Yes No_					
	Are you legally permitted to work in the US? Yes No						
2)	EMPLOYMENT DESIRED						
	Position	Lo	ocation				
	Date you can start		Salary Desired				
	Are you employed now? Yes_	No					
	If so, may we contact your pro	esent employer?	Yes No				
3)	GENERAL INFORMATION						
	List any special skills relevant to the position you are applying for						
	Special training						
	Do you possess a valid driver's license? Yes No License Number						
	Class A B C D	Other					
.)	EDUCATION Name	and Location	Years Attended	Degree/Dipl Certificate E			
	High School						
	College						
	Business Other			·			

Company Name Phone Number							
Address		City	State				
Start Date	End Date		Ending Salary				
Reason for Leaving							
List jobs held, duties performed, and any advancements or promotions while you worked at this company							
May we contact this employer? Yes No							
Company Name		P	Phone Number				
Address		City	State				
Start Date	End Date		Ending Salary				
Reason for Leaving List jobs held, duties pe	rformed, and any ad	vancements o	Ending Salary	ed at this			
Reason for Leaving List jobs held, duties pe company May we contact this em	rformed, and any ad	vancements o	or promotions while you work	ed at this			
Reason for Leaving List jobs held, duties pe company May we contact this em	rformed, and any ad	vancements o	or promotions while you work	ed at this			
Reason for Leaving List jobs held, duties pe company May we contact this em Company Name	rformed, and any ad	vancements o	or promotions while you work	ed at this			
Reason for Leaving List jobs held, duties pe company May we contact this em Company Name Address	rformed, and any ad	vancements o	or promotions while you work	ed at this			
Reason for Leaving List jobs held, duties pe company May we contact this em Company Name Address Start Date	rformed, and any ad	vancements o	or promotions while you work	ed at this			
Reason for Leaving List jobs held, duties pe company May we contact this em Company Name Address Start Date Reason for Leaving List jobs held, duties pe	rformed, and any ad ployer? Yes No End Date rformed, and any ad	vancements o	or promotions while you workhone NumberState	ed at this			

6) <u>REFERENCES</u>

Name	Phone Number	Years Acquainted
Authorization		

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and the release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate authorization from me to consent to these reports. I also understand that a conviction will not automatically result in disqualification from employment."

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document upon hire.

Signature

Date

Dakota Missouri Valley & Western Railroad 3501 E. Rosser Ave. Bismarck ND 58501 Email: employment@dmvwrr.com