

Redwood Falls Location:
515 W Bridge St, PO Box 248
Redwood Falls, MN 56283
507-637-3503



SERVICE ENTERPRISES, INC.
Opportunities for People & Business

Marshall Location:
700 N 7th St
Marshall, MN 56258
507-532-5503

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, creed, religion, national origin, sex, disability, age, marital status, sexual preference, veteran status with regard to public assistance. Consistent with the Americans with Disabilities Act, applicants may request accommodations needed to participate in the application process.

PERSONAL INFORMATION:

Today's Date: _____ Social Security #: _____
Name: _____
Street Address: _____
City, State, Zip: _____
Telephone #: _____ Best time to contact? _____
Referred by: _____ Are you 19 years of age or older? ___ Yes ___ No

EMPLOYMENT DESIRED:

Position: _____ Date you can start: _____
Salary Desired: _____ Have you applied here before? _____ When? _____
Are you employed now? ___Yes ___No If so, may we inquire of your present Employer? ___Yes ___No

EDUCATION:

	Name and Location of School	Circle	
		Last Year Completed	Did You Graduate?
Grammar School			Yes <input type="checkbox"/> No <input type="checkbox"/>
High School		1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>
College		1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>
Trade, Business or Correspondence School		1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>
Subjects Studied and Degree(s) Received			

GENERAL:

Do you have some special job-related skills, interests, or experiences? _____

REFERENCES:

List below three persons not related to you whom you have known at least one year.
At least one should be a former employer.

	Name	Address & Telephone #	Position	Years Acquainted
1				
2				
3				

FORMER EMPLOYERS: List below your last four employers, starting with the last one first.

Employer	Dates Employed from to		Position / Work Performed
Address			
Telephone #			
Job Title	Supervisor		
Reason for leaving			

Employer	Dates Employed from to		Position / Work Performed
Address			
Telephone #			
Job Title	Supervisor		
Reason for leaving			

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Address			
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Job Title	Supervisor		
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AUTHORIZATION:

I certify that the facts in this application are true and complete to the best of my knowledge and I understand that, if employed, misrepresentation of information requested is cause for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment, and any pertinent information they may have; and release all parties from all liability for any damage that may result from furnishing same to you. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time, without cause and without any previous notice.

Date: _____ Signature _____

If returning by mail please send to the Redwood Falls PO Box on the front of this application.