



Welcome to Northern Plains Laboratory's Employment Application!

Northern Plains Laboratory is committed to the policy of equal employment in recruitment, interviewing, hiring, and all other personnel practices. As such, Northern Plains Laboratory takes affirmative action to preclude discrimination in recruiting, interviewing, hiring, training, and terminating employees because of race, color, creed, age, sex, national origin, veteran's status, disability, or any other reason in accordance with the applicable state and federal statutes, executive orders, and other regulations which prohibit discriminatory employment practices. The information you provide in the application will be treated confidentially and used only to help assure the best use of your abilities should you be employed by Northern Plains Laboratory.

To be considered for a position at NPL, follow these easy steps:

1. Print the "Employment Application" and "Voluntary Equal Employment Opportunity Self-Identification Survey".
2. The application will take approximately 20 minutes to complete. The initial pages deal with items such as personal information, previous work history and education. The "Authorization and Agreement" section at the back of the application should be read completely prior to signing and dating.
3. The "Voluntary Equal Employment Opportunity Self-Identification Survey" form is provided to help us comply with government regulations regarding Equal Employment. Providing this information is voluntary.
4. If you have any questions on the completion of this form, please call 701-530-5700 and one of our client service representatives will be able to direct your call appropriately.
5. Mail the completed forms to:
Internal Support Coordinator
Northern Plains Laboratory
401 North 9th Street
Bismarck, ND 58501-4507

Thank you for your interest in Northern Plains Laboratory. We believe each employee contributes to the Company's growth and success and want our employees to take pride in being a member of our team.



401 North 9th Street
Bismarck, ND 58501-4507
701-530-5700

APPLICATION FOR EMPLOYMENT (HR-1.001)

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

PERSONAL INFORMATION

Name (last name, first name, middle initial)			Social security no.
Present address	City	State	Zip
Permanent address	City	State	Zip
Home phone	Cell phone	E-mail	
Are you prevented from lawfully becoming employed in the United States because of Visa or Immigration Status? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you under 16 yrs of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of citizenship or immigration status will be required upon employment			
Are you currently named as a defendant or convicted of a felony or misdemeanor for mistreatment, neglect or abuse of any person, or a misappropriation of property? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been convicted of any other felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Please explain:			
A criminal conviction record does not by itself constitute an absolute bar to employment. The nature of the conviction will be examined on a case-by-case basis, including subsequent rehabilitation, and will be considered in relation to the responsibilities of the position sought in making each employment decision.			

DESIRED EMPLOYMENT

Position	Date you can start?	# of hours	Salary desired
Have you ever applied to or worked for this company before? <input type="checkbox"/> yes <input type="checkbox"/> no	When?	Under what name?	
Reason for leaving	Name of last supervisor at this company		
Who referred you to this company? <input type="checkbox"/> employment agency <input type="checkbox"/> newspaper advertisement <input type="checkbox"/> friend <input type="checkbox"/> walk-in <input type="checkbox"/> other _____			

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YRS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
Grammar School				
High School				
College				
Trade, business, correspondence school				
Specialized training, apprenticeship, and extra-curricular activities that may be helpful in considering your application:				

WORK HISTORY

List previous employers, starting with the most recent/current employer. Indicate if you were employed under a different name.

1. Name of most recent or current employer			
Address		City	State Zip
Starting date	Leaving date	Job title	
Hourly starting salary	Hourly final salary	Are you currently employed with this company? <input type="checkbox"/> yes <input type="checkbox"/> no	
Name of supervisor	Phone	May we contact this employer for a reference? <input type="checkbox"/> yes <input type="checkbox"/> no	
Job duties			
Reason for leaving			

2. Name of employer			
Address		City	State Zip
Starting date	Leaving date	Job title	
Hourly starting salary	Hourly final salary	Are you currently employed with this company? <input type="checkbox"/> yes <input type="checkbox"/> no	
Name of supervisor	Phone	May we contact this employer for a reference? <input type="checkbox"/> yes <input type="checkbox"/> no	
Job duties			
Reason for leaving			

3. Name of employer			
Address		City	State Zip
Starting date	Leaving date	Job title	
Hourly starting salary	Hourly final salary	Are you currently employed with this company? <input type="checkbox"/> yes <input type="checkbox"/> no	
Name of supervisor	Phone	May we contact this employer for a reference? <input type="checkbox"/> yes <input type="checkbox"/> no	
Job duties			
Reason for leaving			

REFERENCES

List below the names of three persons not related to you or previous employers, whom you have known at least one year.

NAME	ADDRESS AND PHONE	RELATIONSHIP	YRS KNOWN

LICENSURE INFORMATION

For positions requiring a professional license, list the license name, number and expiration date

For positions requiring a professional license, list the license name, number and expiration date		
Are you licensed in North Dakota? <input type="checkbox"/> yes <input type="checkbox"/> no	If not, have you applied for licensure? <input type="checkbox"/> yes <input type="checkbox"/> no	When?

EMERGENCY

Person you want us to notify in case of emergency, should you be employed

Name	Address	Relationship to you
Home phone	Cell phone	E-mail

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

AUTHORIZATION AND AGREEMENT – Please read before signing

I hereby certify that this application contains no willful misrepresentation or falsification and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, my application will be rejected and I may be removed from the job after appointment. I understand that under Title VII of the Civil Rights Act of 1964 and the North Dakota Human Rights Act, I cannot be discriminated against in employment, including consideration for promotion, for reason of race, color, religion, national origin, sex, or on the basis of age, physical or mental disability. I further understand that this employment application and other employment related documents I may have been furnished are not contracts of employment; also, that any oral or written statements to the contrary are hereby expressly disavowed. The employer has my authorization to thoroughly investigate my work, criminal and personal history which is job related. I certify that I will hold no person, corporation or organization liable for giving or receiving information in this investigation.

I further understand that if I am employed, such employment is for an indefinite period of time, that either I or NPL can terminate such employment at anytime, and that NPL can change wages, benefits and conditions at anytime.

DATE

SIGNATURE

Release: Having made application for employment with NPL and desiring them to be informed as to my previous record and character, I hereby authorize NPL to investigate my past record and to ascertain any and all information which may concern my record and character, whether same is of record or not, and release my present and past employers, references, and all persons whomsoever from any damage because of furnishing said information.

DATE

SIGNATURE

NPL provides an orientation period, which allows NPL to review you and your adjustment to your new position. During this orientation period, you and your supervisors have the freedom to terminate your employment at NPL without notice. NPL operates continuously and you are expected to perform services in accordance with your job description and approved work schedule.

Thank you for completing this application form and for your interest in employment with Northern Plains Laboratory. We assure you that your opportunity for employment will be based only on your merit, employment history, and academic background.

Voluntary Self-Identification Form
An Equal Opportunity/Affirmative Action Employer

Northern Plains Laboratory is an Equal Opportunity Employment and Affirmative Action Employer. We comply with government regulations and affirmative action responsibilities. In order to help us comply with government record keeping, reporting, and other legal requirements, please consider completing this Voluntary Self-Identification Form. This data is for analysis and affirmative action reporting, and submission is voluntary. **This information will be kept confidential and will not be considered in the hiring process.**

Name _____ Date _____

Gender: (check one)

Male Female

Race/Ethnic Category: (check one)

Hispanic or Latino

If Hispanic or Latino, what race/races do you consider yourself to be? _____

White (not Hispanic or Latino)

Black or African American (not Hispanic or Latino)

Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)

Asian (not Hispanic or Latino)

American Indian or Alaskan Native (not Hispanic or Latino)

Two or more races (not Hispanic or Latino)

Unknown

Veteran Status: (check all that are applicable)

Armed Forces Service Medal Veteran

Special Disabled Veteran

Recently Separated Veteran

Other Protected Veteran

Served in a war _____ Dates _____

Served in a campaign/Expedition _____ Dates _____

Disability Status:

According to the Americans with Disabilities Act, the term "disability" means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of that individual, a record of impairment, or being regarded as having such impairment.

If you have a disability which might affect your performance or create a hazard to yourself or others in connection with the job for which you are applying or are presently performing, please state the following: 1) the skills and procedures you use or intend to use to perform the job notwithstanding your disability and , 2) the accommodations we could make which would enable you to perform the job properly and safely:

I choose not to voluntarily self-identify this information.

Please return this form to:

Internal Support Coordinator
Northern Plains Laboratory
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Bismarck, ND 58501-4507