



## Application For Employment

Name: \_\_\_\_\_  
First MI Last

Other names by which you have been known: \_\_\_\_\_  
For date verification and reference checking purposes

Address: \_\_\_\_\_  
Street / Route / PO Box

\_\_\_\_\_ City State Zip

Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Position which you are currently applying for: \_\_\_\_\_

### NOTICE OF INTENT TO COLLECT PRIVATE DATA

All applicants are asked to provide the data in this application for the purpose of processing your application. Minnesota State Mankato is required to provide these data to the Minnesota Department of Employee Relations and Finance. State employees who perform personnel or payroll functions and search committees may have access to the data, provided their work reasonably requires access. Others who have legal access to the data may include: Legislative Auditor, Attorney General, enforcement agencies with statutory authority, and any other person or entity authorized by law or court order.

### POST-SECONDARY EDUCATION (list all degrees):

Institution/State	Degree	Date Earned	Major(s)	Specialty (if any)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Employment History** – Please list your most recent employer first. If applicable, include volunteer work and self employment. Provide an explanation for any gaps in employment. All information in this section must be complete. *A resume may be attached. Information need not be duplicated if accurate and complete.* Please attach additional pages if necessary.

1. Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Starting Job Title: \_\_\_\_\_ Final Job Title: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ / \_\_\_\_\_  
From (month / year) To (month / year)

Job Duties: \_\_\_\_\_  
 \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

