

Application for Employment

PLEASE COMPLETE THIS FORM IN ITS ENTIRETY, EVEN IF YOU HAVE ATTACHED A RÉSUMÉ.

PERSONAL INFORMATION						
Name Address City Home or Cell Phone Position applying for	Email Addr	Da State Z	ate Available			
Have you applied for employment here previously?						
Position(s):						
Have you worked here previously?						
Position(s):						
Have you volunteered here previously?	es No Date(s):					
Volunteer Capacity:	· · · · · · · · · · · · · · · · · · ·					
Are you legally authorized to work in the United States of America?						
	EDUCATI	ON				
List all schools you have attended, starting with high school.						
School (Name/Location)	Highest grade level completed	Course taken or degree	Scholastic average			
			□A □B □C □D			
			□A □B □C □D			
			□A □B □C □D			
			□A □B □C □D			

EXPERIENCE

Please give present or most recent position first. Complete this section entirely, even if you have attached a résumé.

1. Company

Type of Business

1. Company	Type of Business					
Address	Job Title					
Employed from (month/year)	to (month/year)					
Supervisor's Supervisor Title	Supervisor's Phone					
Beginning Pay	Ending Pay					
Describe your duties:						
Was the separation voluntary?						
May we contact this employer?						
2. Company	Type of Business					
Address	Job Title					
Employed from (month/year)	to (month/year)					
Supervisor's Supervisor Title	Supervisor's Phone					
Beginning Pay	Ending Pay per hour, or annual					
Describe your duties:						
Was the separation voluntary? Yes No Reason for separa	ation					
May we contact this employer?	your reasons for not allowing us to do so:					
3. Company	Type of Business					
Address	Job Title					
Employed from (month/year)	to (month/year)					
Supervisor's Supervisor Title	Supervisor's Phone					
Beginning Pay	Ending Pay per hour, or annual					
Describe your duties:						
Was the separation voluntary? Yes No Reason for separation						
May we contact this employer? Yes No If <i>No</i> , please give	your reasons for not allowing us to do so:					

4. Company	Type of Business					
Address	Job Title					
Employed from (month/year)	to (month/year)					
Supervisor's Supervisor' Name Title	Supervisor's Phone					
Beginning Pay per hour, or annual	Ending Pay per hour, or annual					
Describe your duties:						
Was the separation voluntary?						
May we contact this employer?						
SPECIAL SKILLS AND G	QUALIFICATIONS					
Please summarize specific job-related skills and qualifications acquired from employment and other experiences. Include software programs, typing speed, training, certifications, etc. Please do not provide information that might reveal a protected class status.						
GENERAL						
Are you known to schools/references by another name or names?						
If Yes, list other name(s):						

REFERENCES					
Professional references preferred. List personal references only if you have no professional references.					
Professional Reference	Describe the Nature of Relation	onship			
Personal Reference	Name				
Position		Years	Acquainted		
Address		Phon	e		
Professional references preferre	ed. List personal references only if	you have no professional refer	ences.		
Professional Reference	Describe the Nature of Relation	onship			
Personal Reference	Name				
Position		Years	Acquainted		
Address		Phon	e		
Professional references preferre	ed. List personal references only if	you have no professional refer	ences.		
Professional Reference	Describe the Nature of Relation	onship			
Personal Reference	Name				
Position		Years	Acquainted		
Address		Phon	e		
The Minneapolis Institute of Arts is an equal opportunity employer. It is the MIA's policy to hire and promote qualified people and administer all terms and conditions of employment without discrimination due to race, color, creed, religion, ancestry, national origin, gender, sexual orientation, disability, age, marital status, status with regard to public assistance, or other protected-class status.					
The Minneapolis Institute of Arts does not discriminate on the basis of disability in admission or access to, or employment in, its programs and activities. If you are in need of a reasonable accommodation to enable you to complete the application process, please contact the Head of Human Resources.					
	SIGNA	TURE			
I have read the foregoing instructions and questions and to the best of my knowledge, my answers are true and correct. I understand that misrepresentation or omission of facts called for herein will be sufficient cause for cancellation of consideration for employment or for dismissal from the MIA's service if I have been employed. The Minneapolis Institute of Arts retains its right to terminate employees, with or without cause, at any time for any reason not in conflict with applicable law or any collective bargaining agreement. I understand that any offer of employment from the MIA will be conditional on my satisfactorily fulfilling all background check requirements. This may include, but is not limited to, criminal and/or credit background checks. If you have a question regarding which checks are required for the position for which you are applying, contact the Human Resources department.					
Date	Signature				