



**Melrose Telephone Company**

We consider applicants for all positions without regard to race, color, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(Please Print)

Position(s) Applied For:	Date of Application:
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How Did You Learn About Us?

Advertisement       Friend  
 Employment Agency       Relative       Other

Last Name	First Name	Middle Name
Address	City and State	Zip Code
Telephone Number(s)	Drivers License Number	Social Security Number
Email address		

Best time to contact you at home is: \_\_\_\_\_

Have you ever filed an application with us before?  Yes  No

If Yes, give date \_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No

*Proof of citizenship or immigration status will be required upon employment.*

Date available for work \_\_\_ / \_\_\_ / \_\_\_      What is your desired salary range? \_\_\_\_\_

Are you available for work:     Full Time  
     Part Time  
     Temporary      (Please indicate dates available \_\_\_ / \_\_\_ - \_\_\_ / \_\_\_)

Will you work overtime if asked?  Yes  No

Can you travel if a job requires it?  Yes  No

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

## Work Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer	Dates Employed From      To		Work Performed
Address			
Telephone Number(s)	Hourly Rate From      To		
Starting/Present Job Title			
Reason for Leaving	Supervisor		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed From      To		Work Performed
Address			
Telephone Number(s)	Hourly Rate From      To		
Starting/Present Job Title			
Reason for Leaving	Supervisor		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed From      To		Work Performed
Address			
Telephone Number(s)	Hourly Rate From      To		
Starting/Present Job Title			
Reason for Leaving	Supervisor		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed From      To		Work Performed
Address			
Telephone Number(s)	Hourly Rate From      To		
Starting/Present Job Title			
Reason for Leaving	Supervisor		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

**Comments: Include explanation of any gaps in employment.**


## Education

School	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.


## Additional Information

**Other Qualifications** Summarize special job-related skills and qualifications acquired from employment or other experience.


## Specialized Skills (Skills/ Equipment Operated)

Indicate below what equipment and other job skills you have.

### Hardware

Computer (e.g., IBM, Macintosh, ect.) - please specify below: \_\_\_\_\_

Operating System - please circle below: \_\_\_\_\_

Win 95 / 98/ ME / 2000 / NT / Other: \_\_\_\_\_

### Software

Spreadsheet – specify: \_\_\_\_\_

Word Processing – specify: \_\_\_\_\_

Database – specify: \_\_\_\_\_

Other – specify: \_\_\_\_\_

### Office Skills

Typing - speed \_\_\_\_\_ wpm

Adding Machine \_\_\_\_\_ touch \_\_\_\_\_ sight

Data Entry

### Office Equipment

Copiers (list): \_\_\_\_\_

Fax Machine: \_\_\_\_\_

Other - specify: \_\_\_\_\_

List any foreign languages that you are familiar with: \_\_\_\_\_

**Speak**

Fair  Good  Excellent

**Read**

Fair  Good  Excellent

**Write**

Fair  Good  Excellent

## Personal/Professional References Do not include family members

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

**Please read the following statements carefully and indicate your understanding and acceptance by signing your name in the space indicated. I certify that the information provided is true, complete and correct.**

1. I understand and agree that any misrepresentation or false statement by me in connection with the application will constitute reason to disqualify me from consideration for employment or, if employed, to terminate my employment.
2. I understand and agree that credit, police, and driving references may be contacted if I apply for a job dealing with funds, confidential materials, or driving on the job.
3. I hereby authorize all former employers and their employees as well as other references listed on this application to answer any questions and to furnish any accurate information from their records concerning me, and I hereby release such companies and persons, as well as MTC and its employees, agents and representatives from any liability for such action and inquiry.
4. I understand that this application does not constitute either an offer of employment or an employment contract, and that MTC functions as a private, at-will employer.
5. I understand that prior to being hired, the applicant will be required take a physical exam which will include, among other things, drug testing.

<hr/> Signature of Applicant	<hr/> Date
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**Return To:**

**diversiCOM  
Melrose Telephone Company  
224 E Main St  
PO Box 100  
Melrose MN 56352**

**Contact # 1-800-554-0185**