



APPLICATION FOR EMPLOYMENT

DATE: 4/15/19

NAME: Marketing Specialist

POSITION: Full-Time (Will consider W2 or 1099 Employees)

WAGE: \$15 – 18/hour based on education and experience.

REPORTS TO: Board Secretary/Treasurer and/or designee

OFFICE LOCATION: Pelican Rapids, Minnesota

Notice to Applicants: Complete all applicable areas of the employment application form. Do not mark the form "see resume." Although you are not legally required to provide any of the information on this form, failure to provide complete, accurate information may reduce your opportunity for employment with Otter Tail Lakes Country Association. Employment application forms must be signed and received by the posted deadline to receive consideration.

PERSONAL INFORMATION

Full Name (First, Middle, Last)		Alias/Former/Maiden Name(s)	
Street Address		City, State, Zip Code	
Primary Phone	Alternate Phone	Email Address	
Are you either a United States citizen or legally eligible to hold employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have any special needs which may necessitate accommodation in the application/interview process? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe the type of accommodation requested:	

POSITION INFORMATION

Position Applying For	Date Available to Start Work
How did you learn of this job?	

WORK & VOLUNTEER EXPERIENCE

List all work experience and relevant volunteer experience, starting with the most recent. Attach additional sheets if necessary to include your entire employment history.

Employer/Organization Name	Job Title
Address	Name and Title of Supervisor
Telephone	Dates Employed (mm/yyyy – mm/yyyy)
Primary Duties and Responsibilities	Reason for Leaving

Employer/Organization Name	Job Title
Address	Name and Title of Supervisor
Telephone	Dates Employed (mm/yyyy – mm/yyyy)
Primary Duties and Responsibilities	Reason for Leaving

Employer/Organization Name	Job Title
Address	Name and Title of Supervisor
Telephone	Dates Employed (mm/yyyy – mm/yyyy)
Primary Duties and Responsibilities	Reason for Leaving

Employer/Organization Name	Job Title
Address	Name and Title of Supervisor
Telephone	Dates Employed (mm/yyyy – mm/yyyy)
Primary Duties and Responsibilities	Reason for Leaving

Employer/Organization Name	Job Title
Address	Name and Title of Supervisor
Telephone	Dates Employed (mm/yyyy – mm/yyyy)
Primary Duties and Responsibilities	Reason for Leaving

Employer/Organization Name	Job Title
Address	Name and Title of Supervisor
Telephone	Dates Employed (mm/yyyy – mm/yyyy)
Primary Duties and Responsibilities	Reason for Leaving

EDUCATION

You may be asked to provide official copies of your degree/diploma to be considered for employment with Otter Tail Lakes Country Association. Attach additional sheets if necessary to include your entire educational history.

School	School Name	City & State of School	Course of Study	Dates of Attendance (mm/yy)	Did you receive a diploma or degree?
High School				Do not list dates of attendance for high school	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress
College/ University					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress
Technical/ Vocational					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress
Graduate					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress
Other					<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress

TECHNOLOGY SKILLS

Indicate level of experience and/or knowledge.

N = None

B = Basic

W = Working

E = Expert

Microsoft Word:	Microsoft Excel:	Microsoft Access:	Microsoft PowerPoint:
Word Press:	Social Media:	Customer Relationship Management Software (CRM):	Photography:
Other Technology Experience and/or Knowledge:			

PROFESSIONAL REFERENCES

These should be people able to discuss your qualifications for the position you seek, including managers, directors, or heads of departments under whom you have worked. Do not include relatives. The Association reserves the right to contact all prior employers, educational institutions or organizations where you have volunteered in addition to references listed below.

Name	How does this reference know the applicant?	Address	Phone Number

CRIMINAL BACKGROUND INFORMATION

Otter Tail Lakes Country Association will request information regarding criminal history in the event that you become a finalist for this position. For certain positions, criminal background information will be requested during the application stage. Further, the Association may conduct a criminal background investigation on individuals upon making a contingent job offer.

PRIOR EMPLOYMENT

Have you ever been discharged or forced to resign from prior employment, other than in relation to a human rights charge or lawsuit in which you were the claimant/plaintiff? Yes No
If yes, identify the employer and describe the circumstances:

How many days were you inexcusably absent from work during the preceding three (3) years for reasons other than illness or injury of you or your immediate family?

Compensation

Minimum compensation you would consider for this position?

Preferred Employment Type W2 1099 Either

PERSONAL STATEMENTS

Based on your understanding of this position and our organization, why are you interested in being the Digital Marketing Manager for Otter Tail Lakes Country Association?

Describe your previous digital marketing experience.

Describe your previous customer service experience.

To be effective, the selected candidate must be detailed oriented, highly organized and self-directed. Describe how you've demonstrated these skills in previous work settings.

CERTIFICATION, ACKNOWLEDGMENT AND RELEASE

I certify that the answers I have given on this application are true and correct to the best of my knowledge. I understand that any false or misleading information provided or any omission or concealment of facts, will disqualify me from consideration for employment, and constitutes grounds for my immediate dismissal should I be employed by Otter Tail Lakes Country Association.

I understand, acknowledge and agree that no offer of employment is valid or binding until formal approval by the Board or the appointing authority referenced in the job description, and that until such approval, the Association shall not be liable for reliance on any oral or written offers of employment made to me.

In connection with this application **I hereby authorize** any and all current and former employers, organizations where I have volunteered (volunteer organizations) and references named in this application, or any agent of such a former employer or organization, to release to the Association and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, in their possession. I understand that Otter Tail Lakes Country Association will use this information to determine my fitness/qualifications for the position I am seeking.

I hereby release Otter Tail Lakes Country Association and all current and former employers, organizations and references listed herein and any and all agents acting on behalf of said Association, former employers, organizations or references, for any and all liability of whatever nature by reason of requesting or providing such information.

Signed Electronically by Applicant _____ on Date _____

SAMPLE