

608 N ROBINSON AVE **PO BOX 518 HARTINGTON NE 68739-0518** PHONE (402) 254-6758 FAX (402) 254-6759 EMAIL LCNRD@HARTEL.NET

Employment Application
(An Equal Opportunity Employer)
(Submit application and resume to LCNRD office or email)

Full Name:	Social Security #
Address:	Phone #
Previous Address:	Citizenship?
Are you related to any NRD Director or employee?	If Yes, Explain:
Position for which you are applying	
Why are you interested in this job?	
Have you done similar work before?	
What qualifications would you bring to this job?	
Why do you want to leave your present employment?	
	If yes, explain:
	If no, explain;
Has your driver's license ever been revoked or suspended?	If yes, explain:
	explain
WHAT IS YOUR EDUCATIONAL BACKGROU High School Graduate (yes or no) High S	
College or Trade School?yes or no) Coll	ege Name
Major? Graduated?	Degree Received?
List other education or comments: (Note: Use another sheet of paper if ye	ou need more room to evaloin ony engivers)

(Note: Use another sheet of paper if you need more room to explain any answers) Use reverse side to give your employment history.

Your present job (or last job you	ı had):	
Name and Address of Employer	:	
Date of Employment From: _	To:	Salary: \$
Full or Part time?	_ Reason you left?	
Description of Work		
Name and Address of Employer	:	
Date of Employment From: _	To:	Salary: \$
Full or Part time?	_ Reason you left?	
Description of Work		
Name and Address of Employer	:	
Date of Employment From: _	To:	Salary: \$
Full or Part time?	_ Reason you left?	
Description of Work		
Previous Job:		
Name and Address of Employer	:	
Date of Employment From: _	To:	Salary: \$
Full or Part time?	_ Reason you left?	
Description of Work		
	hone numbers of at least three profes	
Name:	Address:	Phone:
Name:	Address:	Phone:
N.	Address:	Phone