

Thank you for your interest in working at Brainerd License Office.

**Job description is as follows:**

We have openings for both full time (40 hours/week, excluding major holidays) & part-time position, approx. 3 to 4 full 8 hour shifts per week (24-32 hours a week), no weekends or evenings. Business hours are Monday – Friday, 8:30am – 5:00pm. Starting pay is \$15.00 per hour.

After 1 year of employment, accrued PTO is available. This is not a state office; therefore we are unable to offer benefits. We work under contract with the State of Minnesota. Because of this, there are strict rules that must be followed. All employees must have a valid driver's license or state ID and be able to pass a background check.

We issue Minnesota Driver's Licenses and ID's, Motor Vehicle titles and registrations and DNR like and kind. All employees must have excellent money skills along with good people skills. Employees must also have good retention, be proficient with a computer and a 10-key calculator.

If you feel you are a good candidate for our office, please fill out the job application below or send us your current resume. You may either e-mail your application or resume to: [brainerd@licensem.n.com](mailto:brainerd@licensem.n.com) or hard mail it to: Brainerd License Office, 623 NW 4<sup>th</sup> St, Brainerd, MN 56401

# BRAINERD LICENSE OFFICE

Employment Application

623 NW 4<sup>th</sup> St  
Brainerd, MN 56401  
218-855-5169

[brainerd@licensem.nm](mailto:brainerd@licensem.nm)

## APPLICANT INFORMATION

Last Name		First		M.I.	D.O.B.		
Street Address				Apartment/Unit #			
City			State	ZIP			
Date Available			Home Phone			Cell Phone	
Preferred Number of Hours			E-mail Address				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, do you have a valid driver's license?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	
If selected for employment, are you willing to submit to a drug screening test?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, explain?				
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain				
Do you have experience with Microsoft Word?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you have experience with Microsoft Excel?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are you familiar with cash registers?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Can you operate a 10 key (Calculator)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Can you operate a credit card machine?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you have good money skills?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		

## EDUCATION

<b>High School</b>			City / State			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<b>Degree</b>	
<b>College /Other</b>			City / State			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<b>Degree</b>	

## PREVIOUS EMPLOYMENT

<b>Company</b>			Phone			
Address			Supervisor			
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From	To	Reason for Leaving				
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
<b>Company</b>			Phone			
Address			Supervisor			
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From	To	Reason for Leaving				
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
<b>Company</b>			Phone			
Address			Supervisor			

Job Title	Starting Salary \$	Ending Salary \$
-----------	--------------------	------------------

Responsibilities

From	To	Reason for Leaving
------	----	--------------------

May we contact your previous supervisor for a reference? YES  NO

**TELL US ABOUT YOURSELF**

**What is your greatest strength?**

**What is your proudest achievement?**

**What's the most important thing you've learned in life?**

**Describe the best supervisor you have ever had:**

**REFERENCES**

*Please list three references.*

<b>Full Name</b>		Relationship	
Company		Phone	
Address			
<b>Full Name</b>		Relationship	
Company		Phone	
Address			
<b>Full Name</b>		Relationship	
Company		Phone	
Address			

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Electronic signature acceptable, click signature box below to electronically sign.

Signature

Date