



D.W. Jones Management, Inc.
Caretaker
Application for Employment



Personal Information

Last Name	First Name	MI	Date
Address			Social Security Number
City	State	Zip Code	Drivers License # & State
Home Phone		Work Phone	

General Information

Where did you hear about this job opening? _____

Have you ever applied to this company before? yes no

 If "yes" when? _____ where? _____

Are you fluent in language, including sign language, other than English? yes no

 If "yes" which language? _____

 Can you read in this language? _____

 Can you write in this language? _____

Have you ever been discharged from any position? yes no

 If "yes" state circumstances. _____

Do you have a valid Minnesota Driver's License? yes no

Are you 18 years if age or older? yes no

How many members are currently residing in your household? _____

Criminal History

Have you ever been convicted of a felony and/or drug conviction? yes no

Have you ever been convicted of or pleaded guilty or "no contest" to a felony (whether or not resulting in a conviction)?
 yes no

Have you ever been convicted of or pleaded guilty or "no contest" to a misdemeanor involving criminal sexual misconduct, kidnapping, arson, harassment and/or stalking (whether or not resulting in a conviction)? yes no

Are you a registered sex offender? yes no

 If you answered yes to any question in this section, please explain. _____

Education

	Elementary	High School	College/University	Post-Grad
School Name				
City, State				
Years completed				
Diploma/Degree				
Describe Course of Study				
Specialized Training, Skills, Extra-curricular Activities				

Character References

Please list three (3) persons not related to you, who have known you for at least twelve (12) months, and have knowledge of your character, experience, ability.

Name: _____	Occupation: _____
Address: _____	Business Phone: _____
City, State, and Zip: _____	How long known? _____
Home Phone: _____	
Name: _____	Occupation: _____
Address: _____	Business Phone: _____
City, State, and Zip: _____	How long known? _____
Home Phone: _____	
Name: _____	Occupation: _____
Address: _____	Business Phone: _____
City, State, and Zip: _____	How long known? _____
Home Phone: _____	

Employment History

Please start with your Current Employer or most recent job first

Current/Most Recent Employer: _____	Duties performed: _____
Address: _____	
City, State, and Zip: _____	
Business Phone: _____	
Job Title: _____	
Supervisor: _____	
Dates Employed: From _____ To _____	May we contact this employer for references?
Reason for leaving: _____	
Previous Employer: _____	Duties performed: _____
Address: _____	
City, State, and Zip: _____	
Business Phone: _____	
Job Title: _____	
Supervisor: _____	
Dates Employed: From _____ To _____	May we contact this employer for references?
Reason for leaving: _____	
Previous Employer: _____	Duties performed: _____
Address: _____	
City, State, and Zip: _____	
Business Phone: _____	
Job Title: _____	
Supervisor: _____	
Dates Employed: From _____ To _____	May we contact this employer for references?
Reason for leaving: _____	



RENTAL RESEARCH SERVICES, INC.

7525 Mitchell Road, #301,Eden Prairie, Minnesota 55344-1958

1-952-935-5700 * Toll Free 1-800-328-0333 * Fax 1-952-935-9212 * Toll Free 1-800-642-5226

**KARI KOSKINEN BACKGROUND CHECK
RELEASE OF INFORMATION**

RRS Y-CODE: _____
PO NUMBER: _____
(PO # = Bldg # + Unit #)

PROPERTY NAME: _____
PROPERTY MANAGER: _____
MANAGERS PHONE: _____

PLEASE PRINT CLEARLY. FORMS WITH ILLEGIBLE PRINTING WILL BE RETURNED UNPROCESSED.

Applicant Data-

Please provide your complete legal name and any other names you have ever used.

First Name Middle Name Last Name

Maiden, previous or alias name - Please write N/A if this does not apply to you.

First Name Middle Name Last Name

First Name Middle Name Last Name

____/____/____
Date of Birth

____/____/____
Social Security Number

Have you lived within the State of Minnesota for the past 10 years? Yes _____ No _____

IF NO, FINGERPRINTING IS REQUIRED BY STATE LAW

Release and Summary of Rights-

A search of the Minnesota State Criminal Records Repository and/or the Federal Bureau of Investigation's Criminal Justice Information Criminal files will be performed on you pursuant to Minnesota State Statutes 299C.67 to 299C.71. By signing this form you are allowing Rental Research Services, Inc., agent for owner/management, to access any criminal data maintained in these files that applies under the statute.

I understand I have the following rights. **1)** to be informed that the owner will request a background check on me to determine whether I have been convicted of a crime specified in section 299C.67, subdivision 2, **2)** to be informed by the owner of the results of this background check and to obtain from the owner a copy of the background check results, **3)** to obtain from the Minnesota State Criminal Records Repository any record that forms the basis for the report, **4)** to challenge the accuracy and completeness of information contained in the report or record under section 13.04, subdivision 4, and **5)** to be informed by the owner if the application for employment or continued employment has been denied because of the results of this background check.

The information provided above is true and correct to the best of my knowledge and I authorize the owner/management and their agent to process this investigation.

Signature

Date