

**NeighborWorks Great Falls**  
**APPLICATION FOR EMPLOYMENT**

Please complete all requested information.

This application is valid for 90 days. Consideration for employment after 90 days requires an updated application.

Position(s) applied for \_\_\_\_\_ Date \_\_\_\_\_

How did you learn about us?

- Advertisement       Relative       Inquiry  
 Employment Agency       Friend       Other \_\_\_\_\_

**PERSONAL INFORMATION**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Zip \_\_\_\_\_

E-mail \_\_\_\_\_

**GENERAL INFORMATION**

Type of employment desired:  Full-time     Part-time     Temporary     Seasonal     Internship

Available for:                       Weekends     Holidays     Evenings

On what date would you be available to work? \_\_\_\_\_

Are you available to travel?     Yes     No

Do you need an accommodation to participate in the application or interview process?     Yes     No

Do you have any relatives employed by this facility?  Yes     No    If **yes**, name of relative: \_\_\_\_\_

Are you legally eligible for employment in the United States?     Yes     No

During the last ten years, have you ever been convicted of a misdemeanor or felony other than a minor traffic offense?

Yes     No    If yes, please explain: \_\_\_\_\_

A "yes" answer will not automatically disqualify you from employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.

**EDUCATION**

LEVEL OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete Address)	CIRCLE LAST GRADE/YEAR COMPLETED	MAJOR & DEGREE
High School			10    11    12	
College			1    2    3    4	
Business or Trade School			1    2    3    4	

**ADDITIONAL INFORMATION**

**Skills and Qualifications.** Summarize any training, skills, and areas of specialization or major interest that may qualify you as being able to perform job-related functions in the position for which you are applying. Include any health care, business, or industrial equipment operated.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Professional Licenses and/or Certifications.**

If licensed, registered or certified, list:

Type: Driver's License (required) State Issued: \_\_\_\_\_ Date Issued: \_\_\_\_\_ No.: \_\_\_\_\_

Type: \_\_\_\_\_ State Issued: \_\_\_\_\_ Date Issued: \_\_\_\_\_ No.: \_\_\_\_\_

**EMPLOYMENT HISTORY**

Please fill this section out completely and do not write, "see resume." Begin with your most recent employment.

**Company Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
\_\_\_\_\_  
Dates of employment: Start \_\_\_\_/\_\_\_\_/\_\_\_\_ End \_\_\_\_/\_\_\_\_/\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

**Company Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
\_\_\_\_\_  
Dates of employment: Start \_\_\_\_/\_\_\_\_/\_\_\_\_ End \_\_\_\_/\_\_\_\_/\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

**Company Name** \_\_\_\_\_ **Address** \_\_\_\_\_  
\_\_\_\_\_  
Dates of employment: Start \_\_\_\_/\_\_\_\_/\_\_\_\_ End \_\_\_\_/\_\_\_\_/\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

If you do not want us to contact any of the above listed current or former employers, please list below and state the reason you do not want each contacted.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

**Professional References:** Give three references who are not relatives or former employers.

Name	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

**APPLICANT STATEMENT**

I certify that all information I have provided in order to apply for and secure work with NeighborWorks Great Falls is true, complete and correct. If any information provided by me is found to be false, incomplete or misrepresented in any respect, it will be sufficient cause to cancel further consideration of this application, or immediately discharge me from NeighborWorks Great Falls service, whenever it is discovered.

I expressly authorize NeighborWorks Great Falls and its agents to contact and obtain information from all references, employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information regarding me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding NeighborWorks Great Falls or its agents for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that NeighborWorks Great Falls does not unlawfully discriminate in employment, and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that completion of this Application for Employment does not guarantee that NeighborWorks Great Falls has employed me.

I certify that I have read, fully understand and accept all terms of the foregoing Application Statement.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

**NEIGHBORWORKS GREAT FALLS IS AN EQUAL OPPORTUNITY EMPLOYER. WE DO NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, COLOR, SEX, AGE, NATIONAL ORIGIN, MARITAL STATUS, MILITARY STATUS, OR DISABILITY.**