

EMPLOYMENT APPLICATION

INSTRUCTIONS: Type or print clearly in dark ink. You must answer all questions completely and correctly. Incomplete or unsigned applications will not be considered. Read the job announcement carefully and attach <u>only</u> the information requested. Applications submitted to the Business Office after the closing date will not be considered.

EMPLOYMENT POSITION								
What Position are you applying for (One Position per Application): Date:								
Are you available to wo		Full Time			ne Part Time Te			
PERSONAL INFORMATION								
Last Name:		First Name	First Name:			Middle Name:		
Mailing Address:		City, State	City, State:			Zip Code:		
Home/Cell Phone	Home/Cell Phone Business Phone		E-mail Address (optional):					
Number: Number:								
Date of Birth: S	of Birth: Social Security Number:			For Male Applicants Only: Are you registered with the Selective Service? YES NO				
Are you a member of a	a member of a		Name of Tribe:			Tribal Status:		
		Where?						
Tribe?							FULLASSOCIATE	
YES NO								
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EDUCATIONAL HISTORY							
Do you have a High School Diploma or GED?				High School Diplo	ma	None	
(If you have a HS Diploma/GED, please answer the questions below)							
Month:							
College or Un	College or University: City/State:		Major/Minor:		Degree:	Year:	
College or Un	College or University: City/State:		Major/Minor:		Degree:	Year:	
If in Graduate	e School, Plea	ase list field of study:					
		WORK	HIS	STORY			
Company Nai	me:	Address:		Telephone Numb	er:	Hourly Wage:	
Job Title:	Job Title:		Dates of Employment:				
Please describe Job Duties:						Reason for Leaving:	
		WORK	HIS	STORY			
Company Nai	me:	Address:		Telephone Numb	er:	Hourly Wage:	
Job Title:				Dates of Employr	nent:		
Please describe Job Duties:						Reason for Leaving:	
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	WORK HIS	STORY	
Company Name:	Address:	Telephone Number:	Hourly Wage:
Job Title:		Dates of Employment:	
Please describe Job Duties:			Reason for Leaving:
	WORK HIS	STORY	
Company Name:	Address:	Telephone Number:	Hourly Wage:
Job Title:		Dates of Employment:	
Please describe Job Duties:		Reason for Leaving:	
	WORK HIS	STORY	
Company Name:	Address:	Telephone Number:	Hourly Wage:
Job Title:		Dates of Employment:	
Please describe Job Duties:	<u> </u>		Reason for Leaving:
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	WOR	K SKIL	LS		
Words Per Minute Typing:	Words Per Minute	Shorthand:	Computer Skills:		
				YESNO	
Please list skills, training certificates, or licenses that pertain to the position for which you are applying (include languages, equipment, etc.):					
·					
	DRIVING I				
Do you have a Driver's Licen YESNO	ise?	FULL NAM	ME AS IT APPEAR	RS ON LICENSE:	
(Please attach a copy of your your application)	driver's license to				
Type of License:					
OPERATORCOMMERCIALPASSENGERMOTORCYCLE					
In the space below, please list was not mentioned above:	t any special driving	courses you h	nave completed and	l/or types of licensing that	
——————————————————————————————————————					
MILITARY BACKGROUND					
Have you served in the U.S. A					
•		_	YES N	0	
Branch of Service:		Brancl	h of Service:		
From:	То:	From:		То:	
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BACKO	GROUND INFORMA	TION			
Please answer yes or no to the follow	ing questions:				
During the last 5 years, were you fired from any job for any reason, did you quit after being told					
that you would be fired, or did you leave by mutual agreement because of specific problems?					
Have you ever been convicted of or forfeited collateral for any firearms or explosives violations?					
Are you now under charges for any violations?					
During the last 5 years have you forfeited collateral, been convicted, been imprisoned, been on probation, or been on parole?					
Have you ever been convicted by a m	ilitary court-martial?		0	NO YES	
(If you have no Military Service, answering)	•		0	NO	
	·		H -	YES	
Have you ever been arrested for or cl	harges with a crime involving a chil	ld?	0	NO	
Have you ever been found guilty of, o	or entered a plea of no contest or gu	ilty to, any offense	H -	YES	
under Federal, State or Tribal Law is	•	• •		120	
exploitation, contact, or crimes again	st persons?		0	NO	
			0	YES	
In the last three years, have you had	any driving violations or at–fault a	ccidents?	0	NO	
	REFERENCES				
Name:	Name:	Name:			
Name:	Name:	name:			
Address:	Address:	Address:			
Telephone Number:	Telephone Number:	Telephone Number:			
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REVIEW OF APPLICATION

Please review the following checklist before signing your application. Check all that may apply. <u>FAILURE TO SUBMIT A COMPLETE APPLICATION WILL RESULT IN A DETERMINATION THAT YOUR APPLICATION IS INCOMPLETE AND IT WILL NOT BE CONSIDERED</u>. Take a moment to review your application and make sure you have attached all pertinent documents.

- O Have you answered all the questions and filled in all the information requested in the application that you are submitting (i.e., all *months and years* filled out for years in current and previous positions)?
- O Is a copy of your high school diploma or GED attached to the application if the job announcement is asking for these documents?
- O Is a copy of your official/final college transcripts for positions that have positive education requirements or if you are substituting education for any of the experience requirements of the application attached to your application? (i.e., if you are certified or have training, please attach those documents to your application.)
- O If driving is required, have you included a copy of your driver's license/CDL?
- O Is a copy of your resume' attached?
- O Have you reviewed the vacancy announcement for special requirements or documents that must accompany your application at the time of submission?

APPLICANT CERTIFICATION

I hereby authorize Fort Peck Community College to investigate my background, references, employment record and other matters related to my suitability for employment. This may include a criminal background check and a check on my driving record. I also authorize my former employers or any third party to disclose to the Fort Peck Community College all reports and other information related to my suitability for employment, personal, or otherwise, without giving me prior notice of such disclosure. Furthermore, by signing below I acknowledge that this application is complete to the best of my knowledge and I have attached all documents and information pertinent to the position. In the event of employment, I understand that any false or misleading information given in my application or interview may result in immediate termination from my position. This application is not a contract of employment with the Fort Peck Community College.

Signature of Applicant:	Date:	
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