

## **Montana Shed Center**

Return to 2810 Dakota Lane. Great Falls, Montana 59405 Or E-mail form to jenni@montanashedcenter.com

## **Employment Application**

| Applicant Information                               |                            |                      |  |         |                           |          |  |  |  |  |
|---|----------------------------|----------------------|--|---------|---------------------------|----------|--|--|--|--|
| Full Name:  |                            |                      |  |         | Date:                     |          |  |  |  |  |
|   | Last                       | First                |  |         | M.I.                      |          |  |  |  |  |
| Address:  |                            |                      |  |         |                           |          |  |  |  |  |
|   | Street Address             |                      |  |         | Apartment/Unit #          |          |  |  |  |  |
|   |                            |                      |  |         |                           |          |  |  |  |  |
|   | City                       |                      |  |         | State ZIP Code            |          |  |  |  |  |
| Phone:  |                            |                      | Email  |         |                           |          |  |  |  |  |
| Date Availa   | ble:                       | Social Security No.: |  |         | Desired Salary: <u>\$</u> |          |  |  |  |  |
| Position  |                            |                      |  |         |                           |          |  |  |  |  |
| Applied for: How did you hear about us?             |                            |                      |  |         |                           |          |  |  |  |  |
| Are you a ci  | itizen of the United State | YES NO<br>es?        | YES NO If no, are you authorized to work in the U.S.? $\Box$ |         |                           |          |  |  |  |  |
| YES NO<br>Have you ever worked for this company?    |                            |                      |  |         |                           |          |  |  |  |  |
| YES NO<br>Have you ever been convicted of a felony? |                            |                      |  |         |                           |          |  |  |  |  |
| If yes, explain:                                    |                            |                      |  |         |                           |          |  |  |  |  |
| Education   |                            |                      |  |         |                           |          |  |  |  |  |
| High School: Address:                               |                            |                      |  |         |                           |          |  |  |  |  |
|   |                            |                      |  | NO      |                           |          |  |  |  |  |
| From:   | То:                        | Did you graduate?    |  |         | Diploma:                  |          |  |  |  |  |
| College:  |                            | Address:             |  |         |                           |          |  |  |  |  |
| From:   | То:                        | Did you graduate?    |  | NO<br>□ | Degree:                   |          |  |  |  |  |
| Other:  |                            | Address:             | :  |         |                           |          |  |  |  |  |
|   |                            |                      | YES  | NO      |                           |          |  |  |  |  |
| From:   | То:                        | Did you graduate?    |  |         | Degree:                   |          |  |  |  |  |
| References  |                            |                      |  |         |                           |          |  |  |  |  |
| Please list   | three professional refe    | rences.              |  |         |                           |          |  |  |  |  |
| Full Name:  |                            |                      |  |         | Relationship:             |          |  |  |  |  |
| Company:  |                            |                      |  |         | Phone:                    | <u> </u> |  |  |  |  |
| Address:  |                            |                      |  |         |                           |          |  |  |  |  |

| Full Name:   |  |                     |                |               |                  |  |  |  |
|--|--|---------------------|----------------|---------------|------------------|--|--|--|
| Company:<br>Address:   |  |                     |                | Phone:        |                  |  |  |  |
| Full Name:   |  |                     |                | Relationship: |                  |  |  |  |
| Company:   |  | Phone:              |                |               |                  |  |  |  |
| Address:   |  |                     |                |               |                  |  |  |  |
|  | Previous E                                     | mployme             | ent            |               | _                |  |  |  |
| Company:   |  |                     |                |               |                  |  |  |  |
| Address:   |  |                     |                | Supervisor:   |                  |  |  |  |
| Job Title:   | Starting S                                     | Starting Salary:\$  |                |               | Ending Salary:\$ |  |  |  |
| Responsibili   | ties:  |                     |                |               |                  |  |  |  |
| From:  | То:  | Reason for Leaving: |                |               |                  |  |  |  |
| May we cont  | tact your previous supervisor for a reference? | YES                 | NO<br>□        |               |                  |  |  |  |
|  |  |                     |                |               |                  |  |  |  |
| Company:   |  |                     |                | Phone:        |                  |  |  |  |
| Address:   |  |                     |                | Supervisor:   |                  |  |  |  |
| Job Title:   | Starting S                                     | Ending Sala         | ary: <u>\$</u> |               |                  |  |  |  |
| Responsibili   | ties:  |                     |                |               |                  |  |  |  |
| From:  | То:  | Reason fo           | or Leaving:    |               |                  |  |  |  |
| May we cont  | tact your previous supervisor for a reference? | YES                 | NO<br>□        |               |                  |  |  |  |
|  | Military                                       | Service             |                |               |                  |  |  |  |
| Branch:  |  |                     | From:          |               | То:              |  |  |  |
| Rank at Disc   | Type of  | Discharge:          |                |               |                  |  |  |  |
| If other than  | honorable, explain:                            |                     |                |               |                  |  |  |  |
| 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. |  |                     |                |               |                  |  |  |  |

Signature:

Date: