



## Employment Application

The City of Polson is an equal opportunity employer. Applicants will not be barred from employment, or be discriminated against in compensation or in a term, condition, or privilege of employment based on race, religion, color, age, sex, national origin, citizenship, marital status, mental or physical disability, or any other classification protected by law unless the reasonable demands of the position requires an age, physical or mental disability, marital status, or sex distinction (MCA 49-2-303). Consistent with the provisions of the Americans with Disabilities Act, applicants may request accommodation needed to participate in the application process.

<b>Personal Information</b>
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Name (First, MI, Last) \_\_\_\_\_ Date \_\_\_\_\_

Address Apt. # \_\_\_\_\_

Mailing address \_\_\_\_\_

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

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

<b>Education &amp; Training</b>
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Last grade completed - Grade \_\_\_\_\_ College \_\_\_\_\_ Masters \_\_\_\_\_ Doctorate \_\_\_\_\_

Name & Address of School	Major Course Studied	Graduated or Degree (Y or N)
Last High School Attended/Address:	N/A	
College or University		

Position applying for, be specific: \_\_\_\_\_

Please list any skills you have that are appropriate for the position you are applying for

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If required, will you work? Rotating shifts  YES  NO Saturdays  YES  NO Sundays  YES  NO

Overtime  YES  NO

Date you can start \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Do you have a driver's license ?  YES  NO

Are you over 18?  YES  NO

State why you believe you are qualified for this position

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### Employment History

Starting with your PRESENT or MOST RECENT EMPLOYER, list all employment of past employers in consecutive order. If currently employed, may we contact your employer? YES NO

Full Name Of Company		Employment From/To (Mo/Yr to Mo/Yr)
(Area Code) Telephone		
Street Address	City	State Zip
Name & Title of Supervisor	Reason for Leaving:	
Title of your Position		
List jobs held, duties performed, skills used and promotions while employed at this company:		

Full Name Of Company		Employment From/To (Mo/Yr to Mo/Yr)
(Area Code) Telephone		
Street Address	City	State Zip
Name & Title of Supervisor	Reason for Leaving:	
Title of your Position		
List jobs held, duties performed, skills used and promotions while employed at this company:		

**Employment History (Continued)**

Full Name Of Company		Employment From/To (Mo/Yr to Mo/Yr)
(Area Code) Telephone		
Street Address	City	State
		Zip
Name & Title of Supervisor		Reason for Leaving:
Title of your Position		
List jobs held, duties performed, skills used and promotions while employed at this company:		

**References**

Name	Title
Company	Address
City	State
	Zip
Relationship	Phone

Name	Title
Company	Address
City	State
	Zip
Relationship	Phone

Name	Title
Company	Address
City	State
	Zip
Relationship	Phone

**Applicant Affidavit**

1. I certify that all statements given by me on this application, on my resume or other supplementary material are true and correct without omission. I understand that falsification or omission of any information required by this form is sufficient grounds for immediate disqualification of candidacy or termination of my employment by City of Polson if I should be hired. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.
2. I understand that should employment be extended to me, I may be requested to provide consent to additional job related examination or investigations. This application is not an offer of employment.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENTS.**

I certify that I have read, fully understand and accept all terms of the above statements.

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

Applicant: \_\_\_\_\_

**SUBMIT COMPLETED APPLICATION TO:**  
Cora Pritt, City Clerk  
City of Polson  
106 1st St East  
Polson MT 59860