



TOWN OF WEST YELLOWSTONE
EMPLOYMENT APPLICATION
 AN EQUAL OPPORTUNITY EMPLOYER

Office Use Only

IMPORTANT: Please type or print in ink. You may respond to sections 4 through 7 on separate sheets of paper if all relevant blocks are completed and the same format is followed. On **each** sheet write your name and the job title you are applying for. If you photocopy your application, leave sections 1, 2, and 3 blank and complete these sections each time you apply. You must sign and date each application you submit. **LATE, INCOMPLETE OR UNSIGNED applications will not be considered.**

PLEASE READ THE JOB VACANCY ANNOUNCEMENT CAREFULLY TO FIND: (a) what attachments must be submitted; (b) where to submit your application; (c) the required special qualifications or licenses; and (d) the closing date for receipt of applications.

1. Name

Last

First

Middle

Mailing Address

Street or PO Box

City

State

Zip Code

Telephone Number

Work

Home

Cell

Email address

2. What position are you applying for? (See Job Vacancy Announcement)

Department

Position Title

Will you accept: Full-time Part-time Temporary Dates Available for Temporary _____ to _____

3. The information that you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment with the Town of West Yellowstone or, if hired, may be grounds for termination at a later date. Do you want to be informed before we contact your present employer? Yes No

With my signature below (typed or written), I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to release job-related information they may have about me to the Town of West Yellowstone or its agents and employees. I release all persons or companies from any liability or responsibility for providing such information.

SIGNATURE**DATE SIGNED**

4. EDUCATION - High School Name:

High School Address:

Received Diploma or Equivalency Certificate? Yes No If "No," enter highest grade completed _____

College, University and Other Schools Name and Location	Dates Attended Month/Year	Degree/Certificate Received	Degree/Certificate Date	Major/Minor Field	Credits Earned Indicate Qtr or Sem

Training Courses Name and Location	Dates Attended Month/Year	Did you Complete?	Title/Description of Course	Total Hours

5. List current Professional Licenses, Registration, or Certifications (engineering, medical, CPA, etc.)

Licensing Agency Name and Location	Type of License	Endorsement/Restriction (if applicable)	Date Licensed

6. List special skills such as word processing, operating a forklift, dump truck or computer programming. Include a list of equipment that you know how to use. You may list skills from volunteer work like Habitat for Humanity or from professional organizations like Toastmasters.

7. EXPERIENCE: List your work and/or volunteer experience with emphasis on experience that is relevant to the position you are applying for. **Begin with your present or most recent experience.** Include military service that would help you qualify. **List each promotion as a separate position.** Use Additional Employment Experience forms (PD- 30) as necessary. **This information must be completed even if you submit a resume.**

Name & Complete Address of Employer	
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Your Job Title	Dates Employed	/	to	/	
Type of Business		Month/Year		Month/Year	
Immediate Supervisor(s)	Phone No.	Avg. Hrs. Per Week		Time Employed /	
				Years/Months	
		<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Volunteer	

Describe your duties in detail (knowledge, skills, behaviors required, employees supervised, accomplishments)

Reason for Leaving:

Name & Complete Address of Employer	
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Your Job Title	Dates Employed	/	to	/	
Type of Business		Month/Year		Month/Year	
Immediate Supervisor(s)	Phone No.	Avg. Hrs. Per Week		Time Employed /	
				Years/Months	
		<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Volunteer	

Describe your duties in detail (knowledge, skills, behaviors required, employees supervised, accomplishments)

Reason for Leaving:

7. EXPERIENCE Continued....

Name & Complete Address of Employer	
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Your Job Title	Dates Employed	/	to	/	
Type of Business		Month/Year		Month/Year	
Immediate Supervisor(s)	Phone No.	Avg. Hrs. Per Week		Time Employed /	
				Years/Months	
		<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Volunteer	

Describe your duties in detail (knowledge, skills, behaviors required, employees supervised, accomplishments)

Reason for Leaving:

Name & Complete Address of Employer	
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Your Job Title	Dates Employed	/	to	/	
Type of Business		Month/Year		Month/Year	
Immediate Supervisor(s)	Phone No.	Avg. Hrs. Per Week		Time Employed /	
				Years/Months	
		<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Volunteer	

Describe your duties in detail (knowledge, skills, behaviors required, employees supervised, accomplishments)

Reason for Leaving:

8. Would you like a copy of your Town employment application made available for other similar Town positions?
 YES NO