

Application for Employment
City of Lewistown
305 W. Watson
Lewistown MT 59457
406 535 – 1760

We are an Equal Opportunity Employer.
We do not discriminate on the basis of race, religion, color, sex, age, national origin, marital status or disability.

Job Title for which applying: _____

Which City Department: _____

PERSONAL DATA: Name: _____

Telephone #/Message: _____

Present Address: _____

EDUCATION: Circle Highest School Year Completed: 8 9 10 11 12 13 14 15 16 17 18 19

<u>Name & Location</u>	<u>Course of Study/Training Length</u>	<u>Degree/Certificate</u>
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Last school Attended: _____

College or University: _____

Business or Vocational: _____

Other: _____

Special Qualifications: (licenses, registries, skills with equipment, publications, professional societies, typing or shorthand speed, honors, awards, civic activities, etc.) _____

WORK EXPERIENCE:

Company Name: _____

Address: _____

Phone #: _____ Who to Contact: _____

Dates: (Month & Year) From: _____ To: _____

Job Description (duties, skills, equipment and programs used): _____

Reason for Leaving: _____

2.

Company Name: _____

Address: _____

Phone #: _____ Who to Contact: _____

Dates: (Month & Year) From: _____ To: _____

Job Description (duties, skills, equipment and programs used): _____

Reason for Leaving: _____

3.

Company Name: _____

Address: _____

Phone #: _____ Who to Contact: _____

Dates: (Month & Year) From: _____ To: _____

Job Description (duties, skills, equipment and programs used): _____

Reason for Leaving: _____

PERSONAL REFERENCES (Give the names, addresses and phone numbers of at least three persons, not employers or relatives, who have knowledge of your character, experience and ability and represent a good cross-section of your employment record within the past five years. The applicant hereby gives the City of Lewistown permission to contact these persons.):

Name: _____ Address: _____ Phone#: _____

Date of Application: ____/____/____ Signature: _____

Notice to applicants: Information that you provide on this application is subject to verification, previous employers may be contacted as references. Your signature above indicates that the information provided above is true and accurate. Failing to provide true information would be grounds for termination for cause. This application is only good for 90 days beyond date of application.

Criminal Background checks are required on final interviewees.

Additional sheets describing more work experience or a resume may be attached, if available.