

Missoula Aging Services promotes the independence, dignity and health of older adults and those who care for them.

EST. 1982

MISSOULA *aging* SERVICES

WE'RE PROUD *of* OUR YEARS

APPLICATION FOR EMPLOYMENT

Please complete all fields. INCOMPLETE or UNSIGNED applications could disqualify you from future consideration. We are an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age, national origin, marital status, disability status, protected veteran status or any other legally protected status. Do you need an accommodation to participate in the application or interview process? Yes No

Position(s) Applied For:

Date:

Last Name:

First Name:

Middle:

Address: Street:

City/State/Zip:

Mailing Address (if different):

Telephone Number(s):

Email Address:

Are you over the age of 18 years? If no, you may be required to provide required authorization to work.

Yes No

Have you ever filed an application with us before? (If yes, please give date: _____)

Yes No

Have you ever been employed with us before? (If yes, please give date: _____ Job Title: _____)

Yes No

Are you able to perform the essential functions of the job you are applying for?

Yes No

Are you currently employed?

Yes No

Are you legally eligible for employment in the United States:

Yes No

(Proof of identity and eligibility will be required upon employment)

On what date would you be available for work?

Can you travel if a job requires it?

Yes No

Education

	High School				Undergraduate University				Graduate University			
School Name & Location												
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree	Y		N		Y		N		Y		N	
Describe Course of Study or degree earned.												

Check level of proficiency in using Microsoft Office applications:

	Proficient	Good	Fair
Word			
Excel			
Access			
Outlook			
Other software programs (please list below)			

References

Give name, address AND telephone number of three professional references:

- 1) Name/Address/Phone
- 2) Name/Address/Phone
- 3) Name/Address/Phone

Please indicate how you learned of this employment opportunity:

- Website (provide name site: _____)
- Missoula Job Services: _____)
- Other (please specify : _____)

Employment Experience

Start with your current or most recent position (job), including periods of unemployment and work backwards in time. Include any job-related military service assignments and volunteer activities. Incomplete information could disqualify you from further consideration.

Employer		Dates Employed From		To
Address			Telephone	
Job Title	Supervisor		Reason for Leaving	
Work Performed				

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Address			Telephone	
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Work Performed				

Employer		Dates Employed From		To
Address			Telephone	
Job Title	Supervisor		Reason for Leaving	
Work Performed				

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, please explain. (Examples include; classes (include dates), certificates, current licenses, specific equipment and other skills):

Applicant's Statement:

The information that you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment 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:**

I attest with my signature below (typed or written), that all information on this application 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 and I release all persons or companies from any liability or responsibility for providing such information.

Signature of Applicant _____ Date _____

FOR PERSONNEL DEPARTMENT USE ONLY			
Arrange Interview	Yes	No	Interviewer: _____ Date _____
Remarks: _____			
Employed Yes No Date of employment: _____			
Job Title: _____		Department: _____	
Hourly rate/salary: \$ _____			
Notes:			

MISSOULA AGING SERVICES IS AN EQUAL OPPORTUNITY EMPLOYER