

# Application For Employment

Carroll College, 1601 North Benton Avenue, Helena, MT 59601-0002 406-447-5500  
Fax: 406-447-4533



## Personal Information

Name:		Date:
Social Security Number:		
Home Address:		
City, State Zip:		Are You At Least 18 Years Of Age?
Home Phone:	Message Phone:	
Are You Eligible to Work In the U.S.?	If Not Give Visa No. & Expiration:	

## Position Applying For

Title:		
Referred By:		Date Available:
Have You Ever Been Convicted Of A Crime? Yes <input type="checkbox"/> No <input type="checkbox"/>	NOTE: OMIT MINOR TRAFFIC VIOLATIONS. A CONVICTION WILL NOT NECESSARILY BAR APPLICANTS FROM EMPLOYMENT.	
If Yes, Please Explain:		

## Education

High School (Name, City, State):	
Did You Graduate?	
Business or Technical School :	
	Degree, Major:
Undergraduate College :	
Dates Attended:	Degree, Major:
Graduate School:	
Dates Attended:	Degree, Major:

## Employment History

Starting with present employer (or most recent), list all experience and account for all time during the last 10 years, including periods of unemployment and U.S. Military Service. Please feel free to attach additional pages in the same format.

Dates: Month/Year	Employer	Title or Position (Describe Your Duties)	Rate of Pay
<b>From:</b>	<b>Name:</b>		<b>Start:</b>
	<b>Address:</b>		<b>End:</b>
	<b>City, State, Zip Code:</b>		<b>Other Compensations:</b>
<b>To:</b>	<b>Company Telephone Number:</b>		
	<b>Supervisor:</b>	<b>Reason For Leaving:</b>	
	<b>May We Contact Your Present Employer?</b>		
<b>From:</b>	<b>Name:</b>		<b>Start:</b>
	<b>Address:</b>		<b>End:</b>
<b>To:</b>	<b>City, State, Zip Code:</b>		<b>Other Compensations:</b>
	<b>Company Telephone Number:</b>		
	<b>Supervisor:</b>	<b>Reason For Leaving:</b>	
<b>From:</b>	<b>Name:</b>		<b>Start:</b>
	<b>Address:</b>		<b>End:</b>
<b>To:</b>	<b>City, State, Zip Code:</b>		<b>Other Compensations:</b>
	<b>Company Telephone Number:</b>		
	<b>Supervisor:</b>	<b>Reason For Leaving:</b>	

Carroll College promotes equal employment opportunities and endeavors to provide a non-discriminatory workplace for employees regardless of race, color, religion, creed, sex, age, handicap, national origin, marital status, or status as a Vietnam-era or disabled veteran.

I certify that the information contained in this employment application is complete, correct and accurate to the best of my knowledge and I understand that any falsifications or omissions may result in denial of employment or dismissal. I authorize Carroll to act as my agent in securing information about me from any person or company without liability to such person or company or to Carroll. If an employment relationship is established, I understand that at any time during the initial twelve-month probationary period, my employment and compensation can be terminated either by myself or by Carroll College with or without notice or cause. In addition, if accepted for employment, I hereby agree to abide by the policies of Carroll College.

Signature \_\_\_\_\_ Date \_\_\_\_\_