



BOYS & GIRLS CLUBS
OF YELLOWSTONE COUNTY

Boys & Girls Clubs of Yellowstone County
505 Orchard Lane
Billings, MT 59101
Phone: 406 245-2582

DATE: _____

POSITION APPLIED FOR: Full Time _____ Part Time _____ VOLUNTEER _____

DATE YOU CAN START: _____ SALARY RANGE _____ TO _____

EQUAL OPPORTUNITY EMPLOYER: It is our policy to abide by all Federal and State laws prohibiting employment discrimination solely on the basis of a person's race, color, creed, national origin, religion, age, sex, marital status, or physical handicap, except where a reasonable, bona fide occupational qualification exists.

PLEASE PRINT IN INK OR TYPE:

PERSONAL DATA

| | | | | |
|---|--|------------------------------------|--|--|
| NAME (LAST) (FIRST) MI SOCIAL SECURITY NUMBER | | | | |
| ADDRESS STREET CITY STATE ZIP CODE | | | | |
| PHONE NUMBER _____ | | DRIVERS LICENSE _____ YES _____ NO | | |
| STATE ISSUED _____ | | LICENSE NUMBER _____ | | |
| Emergency Contact and Number _____ | | | | |

PREVIOUS ADDRESSES DURING THE LAST FIVE YEARS

| | | | |
|---------|------|-------|-----|
| Address | City | State | Zip |
| Address | City | State | Zip |
| Address | City | State | Zip |

List the former work experience beginning with most recent.

NAME OF EMPLOYER

TYPE OF BUSINESS

ADDRESS

CITY

STATE

ZIP CODE

PHONE

DATES EMPLOYED

FROM: _____ TO: _____

MAY WE CONTACT

Yes No

WAS EMPLOYMENT

FULL TIME PART TIME

REASON FOR LEAVING:

List the former work experience beginning with most recent.

NAME OF EMPLOYER

TYPE OF BUSINESS

ADDRESS

CITY

STATE

ZIP CODE

PHONE

DATES EMPLOYED

FROM: _____ TO: _____

MAY WE CONTACT

Yes No

WAS EMPLOYMENT

FULL TIME PART TIME

REASON FOR LEAVING:

Education and Training

HIGH SCHOOL **COMPLETE ADDRESS** **GRADUATED** **YES** **NO**

COLLEGE OR UNIVERSITY **COMPLETE ADDRESS** **MAJOR DEGREE/YEAR**

COLLEGE OR UNIVERSITY **COMPLETE ADDRESS** **MAJOR DEGREE/YEAR**

TRADE SCHOOL **ADDRESS** **SUBJECTS** **YEAR COMPLETED**

APPRENTICE SCHOOL **ADDRESS** **SUBJECTS** **YEAR COMPLETED**

LIST ANY OTHER EDUCATION, TRAINING, SPECIAL SKILLS OR CERTIFICATES/LICENSES THAT YOU POSSESS RELATED TO THIS JOB:

Are you computer literate? ___ Yes ___ No If yes what applications are you fluent in?

Have you been convicted of a felony or misdemeanor? Yes No
(Conviction will not necessarily disqualify an applicant from employment)
If yes, please explain:

References

LIST PERSONS KNOWN, UNRELATED TO YOU FOR AT LEAST THREE YEARS:

1. _____

2. _____

3. _____

Please read carefully before signing. If you have any questions regarding the following statement, please ask for assistance.

I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that any false information contained in this application may result in my discharge.

I authorize you to communicate with all my former employers, school officials and persons named as references. I hereby release all employers, schools and individuals from any liability for any damage whatsoever resulting from giving such information.

I understand that as this organization deems necessary, I may be required to work overtime hours or hours outside a normally defined work day or work week. If employed, I understand and agree that such employment may be terminated at any time and without any liability to me for any continuation of salary, wages or employment related benefits.

I hereby authorize the Boys & Girls Clubs of Yellowstone County to check with local, state and national traffic and/or law enforcement agencies regarding my driving record and any and all arrests and convictions, which would cause question of my ability to supervise or give constructive guidance to children including local, state and national sexual offender search. I understand that any information obtained from these checks can be used by the Boys & Girls Clubs of Yellowstone County to evaluate my application for employment. I understand that if I am accepted for a position, continued employment is contingent upon ALL background checks revealing acceptable information.

DATE: _____ SIGNATURE _____

FOR OFFICE USE ONLY:

References checked: Yes No Date: _____ Background Check: Yes No Date: _____

Position Offered: Yes No Start Date: _____ Salary: _____

Location: _____ Position Title: _____