

# Public Sector Application

Please complete this application by typing or printing in ink.

**Employer** \_\_\_\_\_

**Job Order #** \_\_\_\_\_ **Job Title** \_\_\_\_\_

## PERSONAL DATA

**Full Name** \_\_\_\_\_

**Present Address** \_\_\_\_\_  
Street / P.O. Box City State Zip Code

**Phone** \_\_\_\_\_ **Email Address** \_\_\_\_\_

## EDUCATION

**High School Diploma/GED/HiSET?** Yes No

Name	Location	Phone	Diploma/Degree/Specialization
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**High School** \_\_\_\_\_

**College/University** \_\_\_\_\_

**Courses & Training** \_\_\_\_\_

## WORK EXPERIENCE *(List most recent work experience first.)*

**Company Name** \_\_\_\_\_ **Immediate Supervisor** \_\_\_\_\_

**Company Address** \_\_\_\_\_  
Street / P.O. Box City State Zip Code

**Job Title** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Job Description** (duties, skills, equipment used)

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**Dates** \_\_\_\_\_ **Reason for Leaving** \_\_\_\_\_  
From (mm/yy) To (mm/yy)

## WORK EXPERIENCE

**Company Name** \_\_\_\_\_ **Immediate Supervisor** \_\_\_\_\_

**Company Address** \_\_\_\_\_  
Street / P.O. Box City State Zip Code

**Job Title** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Job Description** (duties, skills, equipment used)

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**Dates** \_\_\_\_\_ **Reason for Leaving** \_\_\_\_\_  
From (mm/yy) To (mm/yy)

## WORK EXPERIENCE

Company Name \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

Company Address \_\_\_\_\_  
Street / P.O. Box City State Zip Code

Job Title \_\_\_\_\_ Phone \_\_\_\_\_

Job Description (duties, skills, equipment used)

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Dates \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
From (mm/yy) To (mm/yy)

## ADDITIONAL INFORMATION

Other Relevant Experience

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Licenses, Certificates, special skills, etc.

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## REFERENCES (References should have experience with your work history.)

Name	Location	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you need accommodations for the application or hiring process please speak with the employer. Job Service Montana staff are available to assist you.

Do you need an accommodation to participate in the application or interview process? Yes No

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

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.

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



# ***Employment Information***

**EQUAL EMPLOYMENT OPPORTUNITY** – We are an equal employment opportunity employer; we do not discriminate in employment based upon race, color, national origin, age, physical or mental disability, marital status, religion, creed, sex, sexual orientation or political beliefs; and implements and maintains an effective equal employment opportunity program.

**APPLICATION AND SELECTION PROCESS** – The process used to evaluate an applicant's qualifications may include an evaluation of the Employment Application, an interview and reference or background checks.

**REASONABLE ACCOMMODATIONS** – Under state and federal law, qualified applicants with disabilities are entitled to reasonable accommodations. Modifications or adjustments may be provided to assist applicants to compete in the recruitment and selection process, to perform the essential duties of the job or to enjoy equal benefits and privileges of employment available to other employees. An applicant must request an accommodation when needed. If an accommodation is needed to participate in any selection process, make arrangements well in advance of the process. A description of the selection process and the essential job duties is included in the job announcement.

**EMPLOYMENT PREFERENCE** – The Veteran's Public Employment Preference Act and the Persons with Disabilities Public Employment Preference Act provide preference in public employment for certain military veterans and people with disabilities or their eligible relatives. An applicant claiming preference must complete an Employment Preference Form, PD-25A, available through your local Montana Job Service Workforce Center or see the website at <http://wsd.dli.mt.gov/>. You must also provide the appropriate documentation of eligibility with the application. The required documentation may include a DD-214; a document issued by the Office of the Adjutant General of the Montana National Guard certifying service; or a PHHS Certifications of Disability form. Contact your local Montana Vocational Rehabilitation Services Office, Department of Public Health and Human Services for details on obtaining persons with disabilities preference certification. For more information, contact your local Job Service Workforce Center.

**IMMIGRATION REFORM AND CONTROL ACT** – In accordance with the Immigration Reform and Control Act, the person selected must produce within three days of hire, documentation that he or she is authorized to work in the United States. Examples of such documentation include a birth certificate or social security card along with a driver's license or other picture I.D., a United States Passport, Certificate of Naturalization, a Permanent Resident Card, and Alien Registration Receipt Card (Green Card) or a Resident Alien Card.

**MONTANA COMPLIANCE WITH MILITARY SELECTIVE SERVICE ACT** – In accordance with the Montana Compliance with Military Selective Service Act, men selected for employment must produce documentation showing compliance with the federal Military Selective Service Act. Examples of this documentation include a registration card issued by Selective Service, a letter from Selective Service showing a man was not required to register, or information showing by a preponderance of evidence that a man's failure to register with Selective Service was not done knowingly or willfully.