



# Town of Great Falls

## APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street or PO Box) (City)

\_\_\_\_\_  
(County) (State) (Zip code)

Telephone #: \_\_\_\_\_  
(Home) (Cell)

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Social Security#: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Do you own a car or truck? \_\_\_\_\_ Make & Model: \_\_\_\_\_

Condition of Health: \_\_\_\_\_

Marital Status: \_\_\_ Single \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Widower

Are you in the habit or using intoxication liquors? \_\_\_\_\_

Drugs or Narcotics? \_\_\_\_\_

### Residence

(List for the past 15 years)

DATES:

ADDRESS:

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**Education**

<b>List the names of all Schools Attended</b>	<b>Location City &amp; State</b>	<b>Dates Attended</b>	<b>Certificate or Degree</b>
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**List any special schools or training you have had.  
Give the location and dates:**

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**List any clubs or organizations in which you are or have been a member:**

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**Employment & Unemployment**

(Account for all periods)

**Current Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Dates:** \_\_\_\_\_ to \_\_\_\_\_      **Highest Paid Salary:** \_\_\_\_\_

**Job Description:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**May we contact your present employer:** \_\_\_\_\_ Yes \_\_\_\_\_ No    **Phone#:** \_\_\_\_\_

**If no, why?** \_\_\_\_\_

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

**Address:** \_\_\_\_\_

**Dates:** \_\_\_\_\_ to \_\_\_\_\_      **Highest Paid Salary:** \_\_\_\_\_

**Job Description:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

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

**Address:** \_\_\_\_\_

**Dates:** \_\_\_\_\_ to \_\_\_\_\_      **Highest Paid Salary:** \_\_\_\_\_

**Job Description:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

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

**Address:** \_\_\_\_\_

**Dates:** \_\_\_\_\_ to \_\_\_\_\_ **Highest Paid Salary:** \_\_\_\_\_

**Job Description:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

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

**Address:** \_\_\_\_\_

**Dates:** \_\_\_\_\_ to \_\_\_\_\_ **Highest Paid Salary:** \_\_\_\_\_

**Job Description:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**Have you ever been discharged or asked to resign from a job?** \_\_\_\_\_

**If so, why?** \_\_\_\_\_

\_\_\_\_\_

**What, if any, experience have you had in the type of work you are applying for?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Have you ever been arrested, held in custody, or involved in any court action or proceeding, civil or criminal, directly or indirectly, or been summoned to appear or post bond in any case whatever, including traffic violations? If so, explain:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Do you have any judgements against you? \_\_\_\_\_ If yes, list them:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you now, or ever been a member of an organization that advocates the overthrow of the government of the United States of America by force or violence? \_\_\_\_\_

**Character References**

(Please do not use relatives or former employers)

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

What is your present selective service classification? \_\_\_\_\_

Have you performed active duty in the U.S. Armed Forces? \_\_\_\_\_

If so, what branch did you serve? \_\_\_\_\_ Serial #: \_\_\_\_\_

Dates of active duty: \_\_\_\_\_ to \_\_\_\_\_

Rank at discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

Are you a member of the Armed Forces Reserve or National Guard? \_\_\_\_\_

If yes, list the name and location of Unit: \_\_\_\_\_

\_\_\_\_\_

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The great falls police department reserves the right to investigate all statements in this application. Any false statement or failure to disclose any material fact is sufficient cause for rejection of the application or dismissal after appointment.

The town of great falls is an equal opportunity employer. We adhere to policy of making employment decisions without regard to race, color, religion, sex, national origin, citizenship, age, or disability. Your opportunity for employment with this town depends solely on your qualifications.

I solemnly swear that the foregoing statements are true and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Signature date

I authorize you to investigate my personal history through any investigative agencies or bureaus of our choice.

\_\_\_\_\_  
Signature date