PARK COUNTY

Employment Application

Human Resources Department
414 E Callender St • Livingston MT 59047
Phone: (406) 222-4180 • Fax (406) 222-4180

- Please complete this application by typing or printing in ink. INCOMPLETE or UNSIGNED applications will NOT be considered.
- We are an equal opportunity employer. We do not discriminate on the basis or race, religion, color, sex, age, national origin, marital status, or disability.
- Do you need an accommodation to participate in the application or interview process? YES ☐ NO ☐

Position Applied For	Job Order No.

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	Zip	
Home Phone	Cell Phone	Email	
Date Available	Desired Salary		
Are you a citizen of the United States? YES ☐ NO ☐	If no, are you authorized to work in the U.S.? YES ☐ NO ☐		

Have ever been convicted of a crime other than a traffic violation? YES ☐ NO ☐

Have you ever been convicted in any court of a felony, or any other crime, for which the judge could have imprisoned you for more than year, even if you received a shorter sentence, including probation? YES ☐ NO ☐

Are you a Veteran of Military Service? YES ☐ NO ☐		
Driver's License: Operator ☐ CDL ☐	CDL Type	Endorsements

Are you able to perform the essential functions of the job for which you have applied? YES ☐ NO ☐
(If you are unsure of the essential functions of the job for which you have applied, you may request a job description to be provided for your interview.)

If you answered "No" to the above, please identify those job functions that you cannot perform without reasonable accommodation:

EDUCATION

High School		Address	
From	To	Did you graduate? YES ☐ NO ☐	Degree
College		Address	
From	To	Did you graduate? YES ☐ NO ☐	Degree
Other		Address	
From	To	Did you graduate? YES ☐ NO ☐	Degree

WORK EXPERIENCE (List most recent work experience first)

Company Name		Immediate Supervisor	
Complete Address			
Phone	Job Title	Reason for Leaving	
Responsibilities			
From	To	Starting Salary	Ending Salary $

Company Name		Immediate Supervisor	
Complete Address			
Phone	Job Title	Reason for Leaving	
Responsibilities			
From	To	Starting Salary	Ending Salary $

Company Name		Immediate Supervisor	
Complete Address			
Phone	Job Title	Reason for Leaving	
Responsibilities			
From	To	Starting Salary	Ending Salary $

Company Name		Immediate Supervisor	
Complete Address			
Phone	Job Title	Reason for Leaving	
Responsibilities			
From	To	Starting Salary	Ending Salary $

ADDITIONAL INFORMATION

Volunteer Work
Licenses, Certificates, Special Skills, etc.

REFERENCES

Full Name	Relationship
Company	Phone
Address	

Full Name	Relationship
Company	Phone
Address	

Full Name	Relationship
Company	Phone
Address	

The information that you provided on this application is subject to verification. Falsification or misrepresentations may disqualify you from consideration for employment or, if hired, maybe be grounds for termination at a later date.
Do you want to be informed before we contact your present employer? YES ☐ NO ☐

I understand and agree that as a condition of my employment, I must be authorized to work in the United States and demonstrate that authorization as required by the Immigration Reform and Control Act of 1986. I understand that all offers of employment with Park County are conditional, requiring the satisfactory results of a criminal records investigation. By submitting this application, I am verifying that the information provided herein is true, accurate and complete. If the information on this application is proven at any time to be falsified or misrepresented in any way, I understand that any offer of employment made to me by Park County will be rescinded, and/or I will be discharged from such employment with Park County.

Signature _____ Date _____

Applicant Survey

Title VII of the U.S. Civil Rights Act requires employers to "make and keep records relevant to the determination of whether unlawful employment practices have been or are being committed." This is also a requirement of the Montana Human Rights Act and state and federal laws providing employment opportunities for veterans and person with disabilities. The following survey helps to fulfill these requirements.

This applicant survey will be separated from your application. The survey information will be kept confidential, used only for computerized statistical reports and other lawful uses. Analysis of the information you and others provide will be used to monitor recruitment and selection practices of the employer.

Because this sheet is separated from your application, please give us your name, address and phone number again. To prevent duplicate records, please answer the following questions. Thank you for your cooperation.

Name _____
First Middle Last

Mailing Address _____ City/State/Zip _____

Email _____ Home Phone _____

Other Phone Numbers (such as business, cellular) - Indicate type of phone.

Type _____ Phone No. _____ Type _____ Phone No. _____

Job Applied For: Job Title: _____ Date _____

Location _____

REFERRAL SOURCE - How did you FIRST learn of this position?

- ☐ Newspaper Ad
- ☐ Job Service Posting
- ☐ Internet Listing
- ☐ Career/Job Fair
- ☐ Tribal Employment Rights Office Referral
- ☐ Other
- ☐ Friend
- ☐ Walk-In

☐ Female ☐ Male

ARE YOU OF HISPANIC OR LATINO ORIGIN? ☐ YES ☐ NO (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

SELECT ONE OR MORE OF THE FOLLOWING RACIAL CATEGORIES:

RACE/ETHNIC IDENTIFICATION - Please select one or more of the following categories:

- ☐ AMERICAN INDIAN OR ALASKAN NATIVE (A person having origins in any of the original peoples of North or South America, including Central America, and who maintains tribal affiliations or community attachment)
- ☐ ASIAN (A person having origin in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam)
- ☐ AFRICAN AMERICAN/BLACK (A person having origins in any black racial groups of Africa)
- ☐ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (A person having origins in the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)
- ☐ WHITE (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

MILITARY STATUS - Please check the one box that best describes your military status:

- ☐ No Military Service
- ☐ Active Reserve
- ☐ Inactive Reserve
- ☐ Retired
- ☐ Vietnam Veteran
- ☐ Other Veteran
- ☐ Disabled Veteran

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, and interview and reference or background checks.

REASONABLE ACCOMODATIONS - Under state and federal law, qualified applicants with disabilities are entitled to reasonable accommodations. Modifications or adjustments maybe provided to assist applicants to compete in the recruitment and selection process, to perform and 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 any accommodation is needed to participate in any 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 provided preference in public employment for certain military veterans and people with disabilities or their eligible relatives. An applicants 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 be also provide the appropriate documentation of eligibility with the application. The required documentation maybe 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 person 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.