

STONE CHILD COLLEGE

8294 Upper Box Elder Road
Box Elder, MT 59521



www.stonechild.edu



Phone: (406)395-4875
fax: (406) 395-5827 -Administration

EMPLOYMENT APPLICATION

APPLICANT INFORMATION			
Last Name	First		M.I.
Mailing Address			Date
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.		
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
OPTIONAL: Race:			
<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Black	<input type="checkbox"/> Caucasian <input type="checkbox"/> Chicano/Hispanic

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three (3) professional references.</i>	
FULL NAME:	Relationship
Company	Phone ()
Address	
FULL NAME:	Relationship
Company	Phone ()
Address	
FULL NAME:	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

COMPANY:		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

COMPANY:		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

COMPANY:		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. **If I accept an offer of employment, I am required to complete a pre-employment drug test.**

Signature _____ Date _____