



Submit Application through these options:

Fax: (406) 453-8976

OR

Scan and Email:

veronicam@familyconnectionsmt.org

OR mail to Family Connections

Employment Application

Please attach a Resume and Cover Letter with this application.

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Position(s) Applied For	Date of Application
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Last Name	First Name	Email
Address		City
		State
		Zip Code
Phone #1	Phone #2	

Are you over 18 years of age?

If under 18 years old, proof of your eligibility to work will be required upon employment.

Yes

No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Proof of citizenship or immigration status will be required upon employment.

Yes

No

Have you been convicted of a misdemeanor?

Conviction will not necessarily disqualify an applicant from employment.

Yes

No

If yes, please explain:

Have you been convicted of a felony?

Conviction will not necessarily disqualify an applicant from employment.

Yes

No

If Yes, please explain:

Employment History.

Please start with most recent employment first.

1. Employer		Dates Employed	
		From	To
Address			
Telephone Number(s)		Hourly Rate / Salary	
		Starting	Final
Job Title	Supervisor		
Reason for Leaving			
2. Employer		Dates Employed	
		From	To
Address			
Telephone Number(s)		Hourly Rate / Salary	
		Starting	Final
Job Title	Supervisor		
Reason for leaving			
3. Employer		Dates Employed	
		From	To
Address			
Telephone Number(s)		Hourly Rate / Salary	
		Starting	Final
Job Title	Supervisor		
Reason for Leaving			

Other Qualifications, Training, or Experience that would lend itself helpful in computers, human services, early childhood, elementary education, case management, customer relations, or general office experience:

Education	Name and Address Of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				

Reminder: Please attach a Resume and Cover Letter with this application.

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OR

Mail to: Family Connections Attn: Veronica M. 202 2nd Ave S Ste 201 Great Falls MT 59405

Applicant's Statement:

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

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date