

### **Application for Employment**

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

(PLEASE PRINT)	Pate of Application		
Position Applying For			
Name	Email		
Last, First, Middle Telephone Social Security Nu			
Address Street, City, State, Zip			
If employed and you are under 18, can you furnish a work permit?	🗌 Yes 🗌 No		
Have you filed an application with Miles Community College before If yes, in what year(s)?			
Have you ever been employed by Miles Community College? If yes, in what department?	🗌 Yes 🗌 No		
Supervisor	_ Dates of Employment		
Are you currently employed? Yes No May we contact your present employer? Yes No			
Can you show proof of your eligibility to work in the United States?	🗌 Yes 🗌 No		
Are you currently enrolled as a student at Miles Community College	e? 🗌 Yes 🗌 No		
On what date would you be available to work?			
Are you available to work?   Full Time  Part Time	Shift Work Temporary		
Can you travel if a job requires it?  Yes No			
Have you been convicted of a felony within the last 7 years? (Conviction will not necessarily disqualify applicant from employment)	🗌 Yes 🗌 No		

\*If Yes, please explain on a separate piece of paper.

This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law. Complaints of discrimination may be filed with the USDA, Director, Office of Civil Rights, Washington, DC 20250.

#### Education

Level	Name and Location (City/State)		Course of Study	Completed Degree
Last High School Attended		ar Completed 9, 10, 11, 12)		
College or University				
Graduate School				
Business or Vocational				
Other (Please Specify)				

#### **Professional Licenses or Certificates**

#### Honors Received

# List professional, trade, business or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex or national origin):

#### How did you learn about this opening?

 ,	- J -			
Newspaper Advertisement	Friend	Relative	🗌 Walk-In	Employment Agency
Other (Please Specify)				

**Employment Experience** Start with your present or last job. Include military service assignments and volunteer activities. All information should be completed and reasons for any time lapse should be noted.

Employer			
			WORK PERFORMED
Telephone			
	Dates E	mployed	
Address	From	То	
Job Title			
	Hourly Ra	ate/Salary	
Supervisor	Starting	Final	
	Ŭ		
Reason for leaving			

Employer			
			WORK PERFORMED
Telephone			
	Dates Er	nployed	
Address	From	То	
Job Title			
	Hourly Ra	te/Salary	
Supervisor	Starting	Final	
Reason for leaving			

Employer			
			WORK PERFORMED
Telephone			
	Dates E	mployed	
Address	From	То	
Job Title			
	Hourly Ra	ate/Salary	
Supervisor	Starting	Final	
Reason for leaving			
If you need additional space, please continue on a	concrete chect	of nonor	

you need additional space, please continue on a separate sheet of paper .....

#### **Special Skills and Qualifications**

Summarize special skills and qualifications acquired from employment or other experience such as specific office skills, machines used, etc.

#### Professional References

Name and Title	Company and Address	Telephone Number			

Are you a Veteran of the U.S. Military service? Yes No If Yes, E	Branch
--	--------

#### **Applicant's Statement**

I understand this application is considered current for 90 days. If I want to be considered for employment after that time, I must renew my application in writing.

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 understand that this application is not and is not intended to be a contract of employment.

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 College.

I understand this is a legally binding signature. (Please check box prior to signing.)

Signature
-----------

Date

After the form is completed, please submit along with a cover letter, resume, list of three references, unofficial college transcripts, and Background Check Information form to **Carrie Preller, Human Resources Specialist,** *Miles Community College, 2715 Dickinson Street, Miles City, MT.* 59301.

For Personne	el Department Use Only
Arrange Interview 🗌 Yes 🗌 No	
Interviewer	Date
Remarks	
Employed 🗌 Yes 🗌 No Department	Date of Employment
Job Title	Hourly Rate/Salary
Ву	Date

#### MILES COMMUNITY COLLEGE APPLICANT SURVEY EQUAL EMPLOYMENT OPPORTUNITY FORM

The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. We appreciate your cooperation in providing the following information.

SEX:	Female		Male
------	--------	--	------

RACE: (check one)

- BLACK (Not of Hispanic Origin) A person having origins in any of the Black racial groups of Africa.
- HISPANIC A person of Mexican, Puerto Rican, Cuban, Central and South American or other Spanish culture or origin, regardless of race.
- ASIAN or PACIFIC ISLANDER A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. The area includes, for example, China, Japan, Korea, and Philippine Islands, and Samoa.
- AMERICAN INDIAN or ALASKAN NATIVE A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
- WHITE (Not of Hispanic Origin) A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

<u>Veteran's Preference</u>. Miles Community College complies with the Montana Veteran's Employment Preference Act and provides preference in employment to eligible veterans, disabled veterans and certain eligible relatives as specified in the Act. Applicants seeking to claim this preference should contact the Human Resources Office, 2715 Dickinson Street, Miles City, Montana 59301, (406) 874-6292 before the screening or closing date for applications.

<u>Accommodation for Persons with Disabilities</u>. The College is committed to make reasonable accommodation for any known disability that may interfere with an applicant's ability to compete in the selection process or an employee's ability to perform the essential functions of the job. If you have such a disability and would like to request accommodation, please contact our office.

<u>Verification of Employment Eligibility</u>. Miles Community College employs only U.S. citizens and aliens lawfully authorized to work in the United States. Pursuant to the Immigration Reform and Control Act of 1986, we require all new employees to complete the Employment Eligibility Verification Form (I-9) which documents their identity and employment eligibility. The I-9 form must be completed and the appropriate documentation provided within three days of the date employment commences.

## Please send completed form to Miles Community College, Human Resources Specialist, 2715 Dickinson Street, Miles City, MT, 59301

#### Miles Community College is an Equal Opportunity Employer