



Employment Application

Employment Application

Applicant Information

Full Name:				Date:	
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		

Address:		
	<i>Street Address</i>	<i>Apartment/Unit #</i>

	<i>City</i>	<i>State</i>	<i>ZIP Code</i>

Phone:		Email	
--------	--	-------	--

Date of Birth:		Social Security #:		Tribal Affiliation:	
----------------	--	--------------------	--	---------------------	--

Position Applied for:		Date Available:	
-----------------------	--	-----------------	--

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 our organization?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?	
--	---------------------------------	--------------------------------	---------------	--

Do you know any Staff or Board members at NIWRC?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, name and relationship:
--	---------------------------------	--------------------------------	--------------------------------

Have you ever been convicted of a crime?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
--	---------------------------------	--------------------------------	--

If yes, explain:	
------------------	--





Employment Application

Education

High School:		Address: (city/state)	
--------------	--	--------------------------	--

From:		To:		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Diploma:	
-------	--	-----	--	-------------------	---------------------------------	--------------------------------	----------	--

College:		Address: (city/state)	
----------	--	--------------------------	--

From:		To:		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree :	
-------	--	-----	--	-------------------	---------------------------------	--------------------------------	----------	--

Other:		Address: (city/state)	
--------	--	--------------------------	--

From:		To:		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree :	
-------	--	-----	--	-------------------	---------------------------------	--------------------------------	----------	--

References

Please list three professional references.

Full Name:		Relationship:	
Company:		Phone:	
Address:			
Full Name:		Relationship:	
Company:		Phone:	
Address:			
Full Name:		Relationship:	
Company:		Phone:	
Address:			



Employment Application

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"/>	
--	---------------------------------	--------------------------------	--



Employment Application

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.

Applicant Signature:		Date:	
----------------------	--	-------	--

Return to:

Email: careers@niwrc.org

515 Lame Deer Ave. PO Box 99 Lame Deer, MT 59043

Phone: 406-477-3896 Fax: 406-477-3898 Toll-Free: 855-649-7299

Website: www.niwrc.org