



**BOYS & GIRLS CLUB
OF THE FLATHEAD
RESERVATION & LAKE CO.**

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

This application does not in any way discriminate against applicants on the basis of race, creed, religion, national origin, age, disability, marital status, sex or pregnancy. No information on this application will be used in any discriminatory manner. Please print clearly.

Date of Application: ____/____/____

Personal Information

Name: _____
(Last) (First) (Middle)

Other Names Used: _____

Street Address: _____ City, ST: _____ ZIP Code: _____

E-Mail Address: _____ Phone Number(s): _____

Do you have adequate means of transportation, including a valid MT Drivers License that would allow you to drive for our organization? YES NO

Drivers License - State: _____ Type/ Class: _____ Expiration Date: ____/____/____

Position of Inquiry

Title/ Category: _____

Requested Wage: _____ Date Available: _____

Why would you like to work for the Boys & Girls Club? _____

Background with the Boys & Girls Club

Have you ever been a member of the Boys & Girls Club? YES NO

If yes, name/ location of Club: _____

How long were you a member? _____

Have you ever volunteered at or been employed by a Boys & Girls Club? YES NO

Position(s): _____ if yes, name/ location of Club: _____

Skills, Qualifications & Education

High School: _____ Location: _____

Dates: _____ Graduate? YES NO

College: _____ Location: _____

Dates: _____ Degree: _____

Other: _____ Location: _____

Dates: _____ Graduate: YES NO

If you did not graduate, why did you leave high school or college? _____

Are you planning to pursue further studies? YES NO

If yes, where, when and what courses? _____

Please list any scholastic honors, offices held and/or extracurricular activities involved in during high school and/or college:

Please summarize any special skills and/or qualifications acquired from your education, previous employment or hobbies, which may be related to this job:

Previous Employment (Most Recent to Least Recent)

Name of Organization: _____	Location: _____
Position: _____	Dates of Employment: ___/___/___ - ___/___/___
Job Description (duties and skills): _____	
Supervisor: _____	Phone Number: _____
Reason for leaving: _____	Permission to Contact Supervisor: <input type="checkbox"/> YES <input type="checkbox"/> NO

Name of Organization: _____	Location: _____
Position: _____	Dates of Employment: ___/___/___ - ___/___/___
Job Description (duties and skills): _____	
Supervisor: _____	Phone Number: _____
Reason for leaving: _____	Permission to Contact Supervisor: <input type="checkbox"/> YES <input type="checkbox"/> NO

Name of Organization: _____ Location: _____
Position: _____ Dates of Employment: ___/___/___ - ___/___/___
Job Description (duties and skills): _____

Supervisor: _____ Phone Number: _____
Reason for leaving: _____ Permission to Contact Supervisor: YES NO

Capability/ Reliability

Is there any reason you would be unable or unwilling to perform any of the tasks required by the job for which you are applying? YES NO

If yes, please explain: _____

Is there any reason why you would be unwilling/ unable to report to work on time every day, on a regular and consistent basis? YES NO

If yes, please explain: _____

