

Billings County Weed Control Board

Employment Application

		Applicant Inforn	nation		
Full Name					
Full Name	Last	First	M.I.	Date	
Address:					
	Street Address			Apartment/Unit #	
	City		State	ZIP Code	
Phone:		Email:			
Date Available:		Are you over the age of 18?			
Position A for:	pplied 				
Are you a States?	citizen of the United	U.S.?			
Note: Prior	ean driving record? r to being hired drivir ever been convicted	YES NO ☐ ☐ If no, explored will be ran. of a YES NO ☐ ☐	plain:		
If yes, explain:					
		Education			
High Scho	ol:	Address:			
From:	To:	Did you YES graduate? ☐	NO □ Diploma:		
College:		Address:			
From:	To:	Did you YES	NO		
Other:		Address:			

Did you YES From: _____ To:____ graduate? □ Degree: References Please list professional references. Full Name: Relationship: Company: Phone: Address: Relationship: Full Name: Company: _____ Phone: Address: Full Name: Relationship: Phone: Company: Address: Previous Employment Phone: Supervisor: Address: _____ Job Title: Starting Salary:\$ Ending Salary:\$ Responsibilities: To: Reason for Leaving:_____ From: May we contact your previous supervisor for a YES NO reference? П П If no please explain: Phone: Company: _____ Address: Supervisor: Job Title: ___Starting Salary: \$ _____ Ending Salary: \$ Responsibilities: To: Reason for Leaving: May we contact your previous supervisor for a YES NO reference? If no please explain:

Company:			Phone:	
Address:			Supervisor:	
	Starting Salary:			
Responsibilities:				
From: To:	To: Reason for Leaving:			
May we contact your previous supervisor for a reference?	YES	NO	If no please explain.	
Milita	ary Service	9		
Branch:		From	n: To:	
Rank at Discharge:	Type of D	ischarge	e:	
If other than honorable, explain:				
Disclaime	r and Sign	ature		
I certify that my answers are true and compl				
If this application leads to employment, I undapplication or interview may result in my rele		t false o	or misleading information in my	
Signature:		Date:		

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