

State Use Only



# State Of Montana Employment Application

An Equal Opportunity Employer

**IMPORTANT:** You are encouraged to apply online (<http://mt.gov/statejobs/statejobs.asp>); however, you may submit this application. Please type or print in ink. You may respond to sections 4 through 7 on separate sheets of paper if you complete all relevant blocks and follow the same format. On **each** sheet include your name and the job title for which you are applying. You must sign and date each application you submit. **Late, incomplete, or unsigned applications will not be considered.**

**Please read the job listing carefully to verify the following:** (a) what attachments you are required to submit; (b) where to submit your application; (c) the required special qualifications or licenses; and (d) the closing date for receipt of application. Tailoring the application to the position is to your advantage.

1. Name \_\_\_\_\_

Last    First    Middle

Mailing Address \_\_\_\_\_

Street or PO Box

\_\_\_\_\_

City    State    Zip Code

Telephone Number (    ) \_\_\_\_\_ (    ) \_\_\_\_\_ (    ) \_\_\_\_\_

Work    Home    Cell

Email address \_\_\_\_\_

2. Provide the information below from the job listing:

Department \_\_\_\_\_

Division \_\_\_\_\_ Job Location \_\_\_\_\_

Position Title \_\_\_\_\_ Position Number \_\_\_\_\_

3. The information you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment with the State of Montana or, if hired, may be grounds for termination at a later date.

Do you want to be informed before we contact your present employer?  Yes  No

With my signature below (typed or written), I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to release job-related information they may have about me to the State of Montana or its agents and employees. I release all persons or companies from any liability or responsibility for providing such information.

SIGNATURE \_\_\_\_\_ DATE SIGNED \_\_\_\_\_

**4. EDUCATION** – High School Name: \_\_\_\_\_

High School Address: \_\_\_\_\_

Received Diploma?  Yes  No GED? \_\_\_\_\_

| College, University and Other Schools<br>Name and Location | Dates<br>Attended<br>Month/Year | Degree/<br>Certificate<br>Received | Degree/<br>Certificate<br>Date | Major/<br>Minor Field | Credits<br>Earned<br>Indicate Qtr<br>or Sem |
|--|---------------------------------|------------------------------------|--------------------------------|-----------------------|---|
|  |                                 |                                    |                                |                       |   |

| Training Courses<br>Name and Location | Dates<br>Attended<br>Month/Year | Did you<br>Complete? | Title/Description of Course | Total<br>Hours |
|---------------------------------------|---------------------------------|----------------------|-----------------------------|----------------|
|                                       |                                 |                      |                             |                |

**5. List current Professional Licenses, Registrations, or Certifications (engineering, medical, CPA, etc.)**

| Licensing Agency<br>Name and Location | Type of License | Endorsement/Restriction<br>(if applicable) | Date<br>Licensed |
|---------------------------------------|-----------------|--|------------------|
|                                       |                 |  |                  |

**6. List special skills such as word processing, operating a forklift, heavy equipment or computer programming. Include a list of equipment that you know how to use. May list skills from volunteer work like Habitat for Humanity or from professional organizations like Toastmasters.**

**7. EXPERIENCE:** List your work and volunteer experience. Emphasize the experience you have that is relevant to the vacant position (refer to job listing). Begin with your present or most recent experience. Include military service that would help you qualify. List each promotion as a separate position. Use Additional Employment Experience forms (PD-30) as necessary. **You must complete this information even if you submit a resume.**

|                                     |       |  |                    |               |      |                                    |                                    |                                    |
|-------------------------------------|-------|--|--------------------|---------------|------|------------------------------------|------------------------------------|------------------------------------|
| Name & Complete Address of Employer |       |  |                    |               |      |                                    |                                    |                                    |
| Your Job Title:                     | _____ |  | Dates Employed     | _____ / _____ | to   | _____ / _____                      |                                    |                                    |
|                                     |       |  |                    | Month         | Year | Month                              | Year                               |                                    |
| Type of Business:                   | _____ |  | Avg. Hrs. Per Week | _____         |      | Time Employed:                     | _____ / _____                      |                                    |
|                                     | ( )   |  |                    |               |      |                                    | Years / Months                     |                                    |
| Immediate Supervisor(s)             | _____ |  | Phone No.          | _____         |      | <input type="checkbox"/> Full-time | <input type="checkbox"/> Part-time | <input type="checkbox"/> Volunteer |

**Describe your duties in detail** (Maximum of 6000 characters, about 1000 words, or a page and a half) -

Reason for Leaving:

|                                     |       |  |                    |               |      |                                    |                                    |                                    |
|-------------------------------------|-------|--|--------------------|---------------|------|------------------------------------|------------------------------------|------------------------------------|
| Name & Complete Address of Employer |       |  |                    |               |      |                                    |                                    |                                    |
| Your Job Title:                     | _____ |  | Dates Employed     | _____ / _____ | to   | _____ / _____                      |                                    |                                    |
|                                     |       |  |                    | Month         | Year | Month                              | Year                               |                                    |
| Type of Business:                   | _____ |  | Avg. Hrs. Per Week | _____         |      | Time Employed:                     | _____ / _____                      |                                    |
|                                     | ( )   |  |                    |               |      |                                    | Years / Months                     |                                    |
| Immediate Supervisor(s)             | _____ |  | Phone No.          | _____         |      | <input type="checkbox"/> Full-time | <input type="checkbox"/> Part-time | <input type="checkbox"/> Volunteer |

**Describe your duties in detail** (Maximum of 6000 characters, about 1000 words, or a page and a half) -

Reason for Leaving:

**7. EXPERIENCE Continued....**

|  |  |                                    |                                    |
|--|--|------------------------------------|------------------------------------|
| Name & Complete Address of Employer  |  |                                    |                                    |
| Your Job Title: _____  | Dates Employed _____ / _____ to _____ / _____        |                                    |                                    |
|  | Month      Year                      Month      Year |                                    |                                    |
| Type of Business: _____  | Avg. Hrs. Per Week _____                             | Time Employed: _____ / _____       |                                    |
|  | (    )   | Years / Months                     |                                    |
| Immediate Supervisor(s) _____  | Phone No. _____                                      | <input type="checkbox"/> Full-time | <input type="checkbox"/> Part-time |
|  |  | <input type="checkbox"/> Volunteer |                                    |
| <b>Describe your duties in detail</b> (Maximum of 6000 characters, about 1000 words, or a page and a half) - |  |                                    |                                    |
|  |  |                                    |                                    |
| Reason for Leaving:  |  |                                    |                                    |

|  |  |                                    |                                    |
|--|--|------------------------------------|------------------------------------|
| Name & Complete Address of Employer  |  |                                    |                                    |
| Your Job Title: _____  | Dates Employed _____ / _____ to _____ / _____        |                                    |                                    |
|  | Month      Year                      Month      Year |                                    |                                    |
| Type of Business: _____  | Avg. Hrs. Per Week _____                             | Time Employed: _____ / _____       |                                    |
|  | (    )   | Years / Months                     |                                    |
| Immediate Supervisor(s) _____  | Phone No. _____                                      | <input type="checkbox"/> Full-time | <input type="checkbox"/> Part-time |
|  |  | <input type="checkbox"/> Volunteer |                                    |
| <b>Describe your duties in detail</b> (Maximum of 6000 characters, about 1000 words, or a page and a half) - |  |                                    |                                    |
|  |  |                                    |                                    |
| Reason for Leaving:  |  |                                    |                                    |



No Military Service  Active Duty  National Guard  Reserve  Retired Military  Former Service  
(separated, not retired)

Vietnam Era Veteran?  Yes  No

## State of Montana Employment and Benefit Information

**Equal Employment Opportunity** – Montana state government is an equal opportunity employer and is committed to promoting diversity and inclusion. Agency managers make employment decisions based on individual merit and qualifications and without regard to race, color, national origin, age, religion, sex (including pregnancy), physical or mental disability, genetic information, veterans' status, creed, political ideas, marital status, or sexual orientation.

Applicants and employees have the right to apply for positions and work in a safe, professional, and productive environment free discrimination. Agency managers strictly prohibit discrimination in all aspects of employment, including hiring, firing, promotions, compensation, job assignments, and other terms, conditions, or privileges of employment.

Refer to the state's [EEO, Nondiscrimination, and Harassment Prevention Policy, Poster, and Harassment Prevention Brochure](#) for more information, including procedures for filing complaints of discrimination.

The State of Montana may not retaliate or allow, condone, or encourage others to retaliate against any applicant, employee, or past employee for opposing unlawful discriminatory practices, filing a discrimination complaint, or testifying or participating in another manner in a discrimination proceeding.

**Reasonable Accommodations** – Montana state government is committed to providing reasonable accommodations to applicants and employees with disabilities in accordance with federal and state laws. Reasonable accommodations are available upon request to assist applicants and employees in any of the following:

- equal opportunity in the in the employment process;
- enable qualified individuals with disabilities to perform the essential functions of the job; and
- enable employees with disabilities to enjoy equal benefits and privileges of employment.

Applicants who need an accommodation to participate in the selection process should request the accommodation as early as possible. The State of Montana will make every effort to respond promptly to a request for accommodation. Click the [Reasonable Accommodation and EEO](#) link for more information.

**Employment Preference** – The Veterans' Public Employment Preference Act and Persons with Disabilities Public Employment Preference Act allow eligible applicants to request a hiring preference when applying for a state government position. Applying for a preference is **voluntary**, and all information related to a preference will be **kept confidential**. State agencies will only use this information during the hiring process and will maintain the information in a separate confidential file. Applicants who wish to claim an employment preference must complete an **Employment Preference Form**. The form is available under **State of Montana Employment Application & Information** at <http://wsd.dli.mt.gov/service/app.asp>. Applicants requesting preference must provide the appropriate documentation along with their application to verify eligibility.

Contact the local Job Service Workforce Center for details on veterans' preference or the local Montana Vocational Rehabilitation Services Office for details on obtaining a disability preference certification.

**Immigration Reform and Control Act** – In accordance with the Immigration Reform and Control Act, the person selected must produce **within three days of hire**, documentation that he or she is authorized to work in the United States. Examples of such documentation include a birth certificate or social security card along with a driver's license or other picture I.D (United States Passport, Certificate of Naturalization, Permanent Resident Card, Alien Registration Receipt Card [Green Card], or a Resident Alien Card).

**Montana Compliance with Military Selective Service Act** – In accordance with the Montana Compliance with Military Selective Service Act, men selected for state government employment must produce documentation showing compliance with the federal Military Selective Service Act. Examples of this documentation include a registration card issued by Selective Service, a letter from Selective Service showing a man was not required to register, or information showing by a preponderance of evidence that a man's failure to register with Selective Service was not done knowingly or willfully.

For other employment information, click on the following links:

[Employment Process Details](#); [Salary and Benefits](#); and [State Government Recruitment Contacts](#)