



Employment Application

(Complete all pages. Attach additional pages if you need more space)

All applicants are given equal consideration for employment without regard to race, color, religion, sex, national origin, age, disability, veteran status, or any other status or orientation protected under applicable state, federal, or local law. Reasonable accommodation for the application process is available for applicants with disabilities.

This application will be kept on file for one month. Should you wish to be considered for employment after that time, please complete a new application.

Date _____

Name _____
Last First Middle

Present Address _____
Number Street City State Zip

How long at present address _____

Social Security Number _____ - -

Telephone _____

Days/Hours available to work

If under 18, please list your age _____

No Preference

Position applied for: _____

Mon ___ Tue ___ Wed ___ Thur ___ Fri ___

Salary desired: _____

How many hours can you work weekly? _____

Can you work overtime? Yes No

Can you work nights? Yes No

Employment desired? Full-time only Part-time only Full-time or Part-time

When can you start work? _____ Have you ever applied for employment here before? Yes No
If yes, when? _____

Can you, after employment, provide proof of eligibility or authorization to work in the United States? Yes No
(Proof of legal authorization to work in the United States will be required upon employment.)

Have you used any other names (for example, maiden name)? If so, please provide: _____

Can you perform the job functions required by the position for which you are applying? _____

Is there anything that prevents your dependable and timely attendance at work? _____

Education

Type of School	Name and Address of School	Years Completed	Major and Degree
High School			
College			
Business / Trade			
Professional School			

Employment Application

(continued)



**MOUNTAIN VISTA
VETERINARY SERVICES**

66062 MT HW-37
Eureka, MT 59917
(406) 478-6887

Have you ever been convicted of any crime other than a traffic offense? Yes No
(Answering 'Yes' does not automatically disqualify you for consideration)

If 'Yes', please provide details _____

Do you have a driver's license? Yes No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____ Expiration date: _____

DO YOU CONSENT TO A BACKGROUND CHECK? Yes No

(INCLUDING CRIMINAL HISTORY AND CREDIT REPORTS)

You will be required to review and sign additional forms if a background check is required.

References

Please list two references other than relatives

Name _____

Name _____

Position _____

Position _____

Company _____

Company _____

Address _____

Address _____

Years known _____

Years known _____

Telephone _____

Telephone _____

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying, including any applicable certifications or specialized training.
