## APPLICATION FOR EMPLOYMENT BUFFALO RESTORATION, INC.

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

PERSONAL INFORM	MATION:	Date:	
Name			
Street Address			
	E-Mail_		
How did you hear abou	t our Company? Current Employee Social Med	dia Employment Agency_	Other
Are you eligible to wor Are you over 18 years	k in the United States, and able to provide documents of age? Yes No Have a valid Montana d	ation to verify eligibility? Yes _ Irivers license? Yes No	No
During the last 10 year No If yes, ple	s, have you been convicted of a crime (excluding mir ase explain:	nor traffic violations), including	DUI? Yes
A conviction will not necessive rehabilitation will be consi	ssarily disqualify you from employment. Such factors as the dedered.	ate of conviction, seriousness and/or r	nature of the crime and
POSITION/AVAILAI	BILITY:		
Position Applied For _ Type of employment do Availability: Weekends	What date are your resired: Full-time Part-Time Temporary On-Call On-Call		
	Name and Location of School	Graduate?	Major/Degree
High School		Y/N	
College		Y/N	
Trade School		Y/N	
Other		Y/N	
Skills and Qualification	ns: Licenses, Skills, Training, Awards:		
Have you ever served i	n the military?YesNo. Service Branch_		
Summarize any job-rel	ated training you received in the United States militar	гу	

Buffalo Restoration, Inc. is an equal opportunity employer. We do not discriminate based on race, religion, color, sex, age, national origin, marital status, military status, or disability.

## **EMPLOYMENT HISTORY:**

Employer:	Address:		
Supervisor:		Phone:	
Position Title:	_ Salary:	From:	To:
Job Description (duties, skills, equipment used):			
May We Contact This Employer (If no, why not?)?			
Reason for Leaving:			
Employer:	_ Address:		
Supervisor:		Phone:	
Position Title:	_ Salary:	From:	To:
Job Description (duties, skills, equipment used):			
May We Contact This Employer (If no, why not?)?			
Reason for Leaving:			
Employer:	_ Address:		
Supervisor:		Phone:	
Position Title:	Salary:	From:	To:
Job Description (duties, skills, equipment used):			
May We Contact This Employer (If no, why not?)?			
Reason for Leaving:			
References: Name/Address/Phone of three references			
I certify that information contained in this application for not hiring me or for immediate termination of en of any or all information listed above.	on is true and comp	plete. I understand that false is point in the future if I am hire	information may be grounds ed. I authorize the verification
Signature		Date	