



175 School House Loop • Kalispell, Montana 59901

# Application For Employment

<b>PERSONAL INFORMATION:</b>		DATE _____						
NAME								
LAST	FIRST	MIDDLE						
PRESENT ADDRESS								
		CITY	STATE					
ALTERNATE ADDRESS								
PHONE NO.		SOCIAL SECURITY NO.						
		CITY	STATE					
		REFERRED BY _____						
<b>GENERAL</b>								
WHAT FOREIGN LANGUAGES DO YOU SPEAK?		READ	WRITE					
U.S. MILITARY OR NAVAL SERVICES		RANK						
U.S. Citizen	Yes <input type="checkbox"/> No <input type="checkbox"/>	If employment is offered, can you submit a birth certificate, social security card, certificate of U.S. citizenship, or verification of your legal right to work in the U.S.?	Yes <input type="checkbox"/>					
If No, are you legally allowed to work in the U.S.?	Yes <input type="checkbox"/> No <input type="checkbox"/>		No <input type="checkbox"/>					
If Yes, how long?	_____	If employment is offered, can you produce personal identification such as a U.S. passport, driver's license, or photograph identification card issued by the U.S.?	Yes <input type="checkbox"/>					
			No <input type="checkbox"/>					
What date are you available for employment? _____								
Have you ever applied for a position with Fun Beverage Inc. before?		Yes <input type="checkbox"/> No <input type="checkbox"/>	When _____					
Are you presently on layoff or leave of absence from any other company?		Yes <input type="checkbox"/> No <input type="checkbox"/>						
If yes, explain here: _____								
<b>EDUCATION</b>								
TYPE OF SCHOOL	NAME AND LOCATION OF SCHOOL	MAJOR(S) OR COURSE	CIRCLE LAST YEAR COMPLETED	GRADUATE ?	GIVE DEGREE(S)	CUM G.P.A. SCALE	STILL ATTENDING	LAST YEAR ATTENDED
Elementary			5 6 7 8	Yes / No				
High School			1 2 3 4	Yes / No			Yes / No	
College			1 2 3 4	Yes / No			Yes / No	
Graduate School			1 2 3 4	Yes / No			Yes / No	
Business or Trade School			1 2 3 4	Yes / No			Yes / No	
Correspondence or Night School			1 2 3 4	Yes / No			Yes / No	
Other job-related educational institutions			1 2 3 4	Yes / No			Yes / No	
<b>WORK PREFERENCES</b>								
Answer only the questions that apply to you and the positions for which you are applying.								
What type of employment do you want?		Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer <input type="checkbox"/>	Will you work shifts? <input type="checkbox"/> Will you work weekends? <input type="checkbox"/>					
For what type of position are you applying?		Sales, Delivery, Warehouse or Office	If applying for <u>Delivery</u> , do you have a current CDL? License type (I.E. CDL Class A, Class 1, ETC.) _____					
Are you willing to travel?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Can you type?	Yes <input type="checkbox"/> No <input type="checkbox"/> W.P.M. _____					
What percent of the time?	_____	Can you keypunch?	Yes <input type="checkbox"/> No <input type="checkbox"/> W.P.M. _____					
Are you willing to relocate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	What is your minimum salary requirement? _____						
Have you ever been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying)								
Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, explain _____						

(CONTINUED ON THE OTHER SIDE)

**EMPLOYMENT HISTORY** (LIST BELOW CURRENT AND PREVIOUS EMPLOYERS, STARTING WITH CURRENT OR LATEST EMPLOYER FIRST)

FULL NAME OF COMPANY		AREA CODE & PHONE NUMBER		SALARY STARTING	EMPLOYED FROM	
STREET ADDRESS		CITY	STATE	ZIP		
NAME & TITLE OF SUPERVISOR		TITLE OF POSITION HELD			ENDING	TO
LIST JOBS HELD, DUTIES PROFORMED, SKILLS USED AND PROMOTION RECEIVED					REASON	

FULL NAME OF COMPANY		AREA CODE & PHONE NUMBER		SALARY STARTING	EMPLOYED FROM	
STREET ADDRESS		CITY	STATE	ZIP		
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**REFERENCES**

**GIVE THE NAMES OF THREE PERSONS, NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.**

NAME	ADDRESS	BUSINESS	YEARS KNOWN
1			
2			
3			

**As an applicant for employment, I understand the following:**

- \* All information is subject to verification.
- \* Any misrepresentation of falsification of information requested here will be cause for rejection of this application or for subsequent discipline up to and including my dismissal from employment.
- \* If my application for employment is accepted, the effective date of my employment shall be the time I actually begin to work. If I am employed, I agree to comply with and be bound by the safety and health rules and regulations of this company.
- \* My employment is not guaranteed for any term, and that my employment may be terminated by this company or myself for any reason.
- \* No management official is authorized to make any oral assurances or promises of continued employment.
- \* I agree to submit to any lawful drug testing that may be required as a condition of employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge.
- \* I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status, or, if aliens, their legal authorization to work in the U.S. Therefore, I realize that any offer of employment would be contingent upon my ability to produce the required documentation within the time period required by law.
- \* Fun Beverage is an equal Opportunity Employer and fully subscribe to the principles of Equal Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

SIGNATURE	DATE
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INTERVIEWED BY	DATE
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