





AN EQUAL OPPORTUNITY EMPLOYER

Employees of Yellowstone County and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, creed, religion, political affiliation, national origin, disability, marital status, sex or age. Based on the duties of some positions minimum age requirements may apply.

PLEASE READ CAREFULLY

- PRINT CLEARLY OR TYPE-

ANSWER ALL QUESTIONS

(Last)						
(Lust)	(First)		(Middle)		(Telephone)	
Address						
Address (Number & Street)	treet) (City)		(State & Zip)		(Message Telephone)	
Are you 16 years or older?		() Yes (
Are you prevented from lawfully becoming em States because of Visa or Immigration Status?	ployed in the United	() Yes () No			
Position applying for:						
Department: () MONTANA FAIR () B Have you ever been convicted of a felony? f yes, describe in full giving dates:					tic bar to employme	
Have you ever worked for MetraPark or Mont AVAILABILITY:	ana Fair? 🗆 No 🛛	Yes When:				
Hours Available MONDAY TUESDA	Y WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
From						
То						
(Starting with the most recent, describe ALL pai	d. military and applicable	voluntary experience	. Give a comple	te record of employ	ment.)	
		May we contact				
osition/Title	From Mo./	/Yr.	To M	lo./Yr.		
nployer		Phon	e:			
ddress	City	<u> </u>	State:	Zip:		
all Time () Part Time () Hours/week	Supervis	or's Name:				
your own words describe your work:						
eason for Leaving:						
ay we contact employer listed below? YES () NO()					
osition/Title	From Mo./	/Yr.	To N	lo./Yr.		
nployer		Phon	e:			
ddress		<u> </u>	State:	Zip:		
Ill Time () Part Time () Hours/week	Supervis	or's Name:				
your own words describe your work:						
eason for Leaving:						

Add additional pages if necessary.

REFERENCES (Minimum of 2 references are required.)					
1) Name	``````````````````````````````````````	Title			
Address		City			
State	Zip	Phone			
Address	Zip				
Address	Zip	City			

MONTANA PREFERENCE ACTS

If you are claiming preference under Montana Veterans' Employment Preference Act or Persons with Disabilities Employment Preference, check the appropriate box(es) below: (Documentation will be required)

To claim Veterans' Employment Preference you must be a U.S. citizen and (check one of the boxes below):

- \Box A Veteran separated under honorable conditions.
- □ A Disabled Veteran separated under honorable conditions.
- □ The spouse of a disabled veteran if the veteran's disability prevents him/her from working.
- \Box The unremarried surviving spouse of a veteran or disabled veteran.
- □ The mother of a veteran, if the veteran lost his/her life under honorable conditions while serving in the Armed Forces, OR has a service-connected, permanent, and total disability.

You may claim Disabled Persons Employment Preference as (check on of the boxes below):

□ A disabled person certified by Vocational Rehabilitation and Blind Services or U.S. Department of Veteran's Affairs.

The spouse of totally (100%) disabled person certified by Vocational Rehabilitation and Blind Services or U.S.

Department of Veteran's Affairs.

If you checked one of the above boxes for Persons with Disabilities Employment Preference Act:

Are you a Montana resident? Yes No If "YES", date residency established: _

CERTIFICATION and AUTHORIZATION FOR RELEASE OF INFORMATION

(Each application requires current date and original signature.)

I am an applicant for a position with Yellowstone County. As such I am required to furnish information, which the County may use to determine my qualifications and suitability for employment.

I hereby certify that all entries and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any consideration or employment with Yellowstone County. I further understand that all information on this application is subject to verification and I consent to a criminal history / driving background checks for applicable positions.

I also consent that authorities of Yellowstone County may contact my references, former employers, educational institutions or any other entities or agencies listed regarding this application. I further release said County, as well as my former employers, from any and all liability resulting from these reference checks.

Date:	Signature					
		y. Please feel free to attach your resume to this application, or				
any other additional information which you feel will be helpful in evaluating your qualifications for the position.						
Submit completed and signed application to:						
	MetraPark	MetraPark				
	308 - 6 th Avenue North	PO Box 2514				
	Billings, MT 59101	Billings, MT 59103				

G: Forms/MetraPark Temp Application 2018