



Midwest Welding Machine  
2320 N 7th Ave, Bozeman, MT 59715  
(406) 587-5417

# Application For Employment

*We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.*

**Position Applied For** \_\_\_\_\_ **Date** \_\_\_\_\_

**Name** \_\_\_\_\_ (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle Initial)

**Address** \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

How did you learn about this position?

Advertisement      Inquiry      Friend/ Relative      Employment Agency      Other

Are you authorized to work in the U.S. on an unrestricted basis?      YES      NO

Note: If hired, you will be required to furnish proof of U.S. citizenship or your authorization to work in the U.S. as specified under applicable U.S. immigration laws

If under 18 years of age, can you provide required proof of eligibility to work?      YES      NO

Have you ever applied for a position with us before? If Yes, when? \_\_\_\_\_      YES      NO

Have you ever been employed with us before? If Yes, when? \_\_\_\_\_      YES      NO

Do any of your friends, relatives (other than spouse), work here?      YES      NO

Are you currently employed?      YES      NO

Are you currently on "lay-off" status and subject to recall?      YES      NO

Can you travel if the job requires it?      YES      NO

Date available to begin work: \_\_\_\_\_ Desired salary range? \_\_\_\_\_

Are you available to work:      Full-Time      Part-Time      Temporary

Please complete the following pages OR Attach your resume and at least 3 references

## **Education**

**High School**      Name \_\_\_\_\_ Location \_\_\_\_\_

Degree/ Diploma \_\_\_\_\_

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**College/Univ.**      Name \_\_\_\_\_ Location \_\_\_\_\_

Degree/ Diploma \_\_\_\_\_

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**College/Univ.**      Name \_\_\_\_\_ Location \_\_\_\_\_

Degree/ Diploma \_\_\_\_\_

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**Other (Please Specify)**      Name \_\_\_\_\_ Location \_\_\_\_\_

Degree/ Diploma \_\_\_\_\_

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Describe any specialized training, apprenticeship, skills and extra-curricular activities.


Describe any job-related training received in the United States military.


List professional, trade, business or civic activities and offices held


## Employment Experience

Employer \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_ Ending Salary \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Work Performed \_\_\_\_\_

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Reason for Leaving \_\_\_\_\_

Work Performed \_\_\_\_\_

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**References**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**Applicant's Statement**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization, is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Position(s) Applied for is Open    Yes    No    Arrange Interview    Yes    No

Position(s) Considered For \_\_\_\_\_

Remarks \_\_\_\_\_  
\_\_\_\_\_

Employed:    Yes    No    Date of Employment \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_

Signed By \_\_\_\_\_ Date \_\_\_\_\_  
(NAME AND TITLE)