



Employment Application

Thank you for your interest in employment opportunities at AWARE. Please read the following information carefully to assist you in completing your application.

Read the position announcement for the posted position for which you are applying.

- If a schedule is included in the posting, make certain that you can work the hours that are required.
- Fill out the application completely and legibly. Incomplete applications or applications that have been altered from the format available on the AWARE's website may not be considered.
- You may submit additional information attached to your application. (Resumes alone cannot be used as a substitute for completing the Employment History and Education section of the application.)
- Please include a copy of your transcripts and/or degree if you've claimed to have obtained one.
- Please sign & return your application via mail or fax located at the bottom of each page, or you may drop it off at any AWARE office nearest you.
- If you are not selected for an interview your application will be kept on file for 90 days. You will be required to submit a new application for positions posted more than 90 days after submitting your original application.

If you have general questions about employment, please contact the Human Resource Department at 406.563.8117 for assistance. Once again, thank you for your time and interest in applying at AWARE.

Please remove this cover sheet prior to submitting application.



Mr.
 Ms.
 Mrs.

Name: _____
Last Name
First Name
Full Middle Name

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Message Phone: _____

Email: _____ Are you 18 or older? Yes No

Are you legally authorized to work in the United States? Yes No

Position applying for: _____

City/Town: _____

Check all the service areas you are interested in:	Youth Service <input checked="" type="checkbox"/>	Adult Service <input checked="" type="checkbox"/>	Administrative <input checked="" type="checkbox"/>
	<input type="checkbox"/> Residential	<input type="checkbox"/> Residential	<input type="checkbox"/> Administration
	<input type="checkbox"/> School Based	<input type="checkbox"/> Work Services	<input type="checkbox"/> Maintenance
	<input type="checkbox"/> Support Services	<input type="checkbox"/> Transportation	<input type="checkbox"/> Human Resources
	<input type="checkbox"/> Case Management	<input type="checkbox"/> Case Management	<input type="checkbox"/> Accounting
	<input type="checkbox"/> Early Head Start		<input type="checkbox"/> IT
	<input type="checkbox"/> Other: _____		

How did you hear about the position:	<input type="checkbox"/> Job Service	<input type="checkbox"/> Newspaper	<input type="checkbox"/> AWARE employee
	<input type="checkbox"/> AWARE web page	<input type="checkbox"/> Family/Friend	<input type="checkbox"/> College Career Service
	<input type="checkbox"/> Other		

Have you ever worked for AWARE? Yes No

If yes Name Used: _____ Location: _____

Dates worked: _____

Military Services:

Branch of Service: _____ Dates of Service: _____

Duties/Special Training: _____



Employment History

To maintain quality employment standards, AWARE may be in contact with the employers listed below to obtain professional references.

Company: Name: Address: City/State/Zip:		Phone:	
		Available to contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Job Title:	Employment Date:	to	
Supervisor:	Starting/Ending Wage:	\$	\$
Duties:			
Reason for Leaving:			

Company: Name: Address: City/State/Zip:		Phone:	
		Available to contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Job Title:	Employment Date:	to	
Supervisor:	Starting/Ending Wage:	\$	\$
Duties:			
Reason for Leaving:			

Company: Name: Address: City/State/Zip:		Phone:	
		Available to contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Job Title:	Employment Date:	to	
Supervisor:	Starting/Ending Wage:	\$	\$
Duties:			
Reason for Leaving:			

You may print additional employment history pages if needed.



EDUCATION

High School		Address/Phone	
Did you receive a high school diploma or equivalency certificate (GED)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
College, University or additional schooling Name, Location, and Dates of Attendance	Major/Minor	Degree Received /Date B.S. <input type="checkbox"/> B.A. <input type="checkbox"/>	
**NOTE: If you have obtained a BS/BA degree, please submit a copy of your degree and/or transcripts.			
Name used while attending:			
Post Graduate Name, Location, and Dates of Attendance		Degree Received /Date	
**NOTE: If you have obtained a BS/BA degree, please submit a copy of your degree and/or transcripts.			
Name used while attending:			
Training Courses Name, Location, and Dates of Attendance	Title of Course	Date completed	Current

As a value to employees, AWARE invests in professional development. As such, a commitment to complete the required training offered by AWARE within the established timeline needs to be made.

I AUTHORIZE THE INSTITUTION(S) NAMED ABOVE TO RELEASE STATED INFORMATION TO AWARE.

Signature: _____

Date: _____



AUTHORIZATION FORM

To complete your application file, it is necessary for us to complete a criminal, motor vehicle, child/adult protective services, education and employment background check and references.

Please sign and date the authorization release below.

AUTHORIZATION: I, the undersigned, hereby authorize any agency, to include state and federal, institution or business, including my present employer to furnish any and all information contained in my records for the purpose of an employment background investigation.

I also authorize personal references to furnish the requested information they may have concerning me, and do hereby release such persons from all liability and damage for issuing such information.

In addition, I hereby certify that the above information is true and correct to the best of my knowledge.

PRINTED: _____ **DATE:** _____

SIGNED: _____