

Please print application and mail completed to:
PO Box 1090 Lakeside, MT 59922
Or fax application to:
406.844.0987



Employment Application

PLEASE TYPE OR PRINT NEATLY IN BLACK INK

Positions applied for (in order of preference):

1. _____ 2. _____ 3. _____

Date: ___/___/___

Name: _____
Last First Middle

Local Address: _____
Street Address City State

Permanent Address: _____
Street Address City State

Email Address: _____ Telephone #: (____) _____
_____ (____) _____

Are you under age 18? Yes ___ No ___ Are you currently authorized to work in the United States? Yes ___ No ___

Have you ever been convicted of a felony? Yes ___ No ___

Have you ever worked for Blacktail Mountain LLC before? Yes ___ No ___

If yes, when? _____ What department? _____

Name any personal acquaintances in the employ of Blacktail Mountain. _____

Do you object to working weekends or holidays? Yes ___ No ___

If yes, please state your restrictions: _____

Please indicate which category of work you are seeking: Winter Season ___ Temporary ___

Please indicate whether you want full or part time work: Full (32-40 hrs. / wk) ___ Part Time ___

First Date you can work: ___/___/___ Last date you can work: ___/___/___

Please state only those starting and ending dates that you can guarantee.

EDUCATION & TRAINING

Name & Location	Years Attended	Graduated	Subjects Studied
High School: _____	_____	_____	_____
College: _____	_____	_____	_____
Other: _____	_____	_____	_____

List any skills that may qualify you for a position with this company.

SKILLS	YRS. EXPERIENCE	LEVEL OF PROFICIENCY
_____	_____	_____
_____	_____	_____

EMPLOYMENT EXPERIENCE

Start with most recent job. Fill in all blanks or your application will not be considered.

1. Employer: _____ Dates: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone: () _____
 Supervisor: _____ Reason for Leaving: _____
 Title & Duties: _____

2. Employer: _____ Dates: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone: () _____
 Supervisor: _____ Reason for Leaving: _____
 Title & Duties: _____

3. Employer: _____ Dates: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Phone: () _____
 Supervisor: _____ Reason for Leaving: _____
 Title & Duties: _____

Additional Comments: _____

This company is an equal opportunity employer and considers all applicants for employment without regard to race, color, sex, religion, national origin, age, marital status, pregnancy, veteran status or disability. If the Company employs me, I will comply with all rules and regulations set forth by the Company. I hereby certify that all answers are true and complete to the best of my knowledge. I authorize that all statements made herein may be investigated and verified in the course of considering this application. If employed, I understand that any misstatement or omission of fact on this application may result in my dismissal. I further understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I have read the above statements and understand them fully.

Signature: _____ Date: ____ / ____ / ____