



GLACIER JET CENTER

****Please be sure to fill this application out completely and then save to your computer as LastName_FirstName.pdf and submit it along with your resume' through our website.****

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Company	Phone

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
<p>I certify that the information in this application is true and complete. Any false statements, concealments or omissions are grounds for refusal to hire or immediate dismissal if hired.</p> <p>I authorize schools, former employers, former supervisors and co-workers to provide any and all information pertinent to my being considered for employment and hereby release those providing such information from any liability for doing so.</p> <p>I understand that employment, if offered, is contingent upon my providing additional information for employee record purposes and also upon my providing proof of identity and employment eligibility and completing a form I-9.</p> <p>I understand that if I am hired, the length of my employment is not guaranteed. Recognizing that I will be free to voluntarily terminate my employment at any time, with or without cause, I acknowledge that my employment can be modified or terminated with or without cause and with or without notice during the probationary period, and at any time for cause and that, if employed, employment does not constitute a contract of employment between myself and Glacier Jet Center or any of its subsidiary or affiliate companies. I understand that no manager or representative of Glacier, other than the owner and his designated representatives, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, either prior to employment or after I have become employed.</p> <p>I will abide by and conform to all company policies, rules, and procedures as may be in effect from time to time.</p> <p>I acknowledge that I have read the above, understand its content and meaning, and agree to all of its provisions.</p> <p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p>	
Signature	Date

Please include your last 5 job work history in this application using the following pages. Please also include a résumé with a detailed work history.

EMPLOYMENT HISTORY LOG



Name:

*Keep each page in order by date of employment with most recent jobs on top. Also include temporary assignments.

COMPANY NAME:		PHONE NUMBER:	
COMPANY ADDRESS:		CITY, STATE, ZIP:	
SUPERVISOR NAME:		PHYSICAL HOME ADDRESS	
TITLE:		DURING EMPLOYMENT:	
START DATE:		END DATE:	
STARTING JOB TITLE:		ENDING JOB TITLE:	
STARTING SALARY:		ENDING SALARY:	
Hourly Annually		Hourly Annually	

Reason for Leaving (be specific):	Type of Position: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Contract/Temporary <input type="checkbox"/> Intern	Hours _____ / week <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt	Number of Employees Supervised:
			Can this employer be contacted?

DUTIES PERFORMED / RESPONSIBILITIES	
SKILLS	EQUIPMENT USED

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