



*If you are a relative of a SFC Member you are not eligible for employment at Stock Farm Club.

APPLICATION FOR EMPLOYMENT
GENERAL INFORMATION

Stock Farm Club
1428 Stock Farm Road
Hamilton, MT 59840

Please Print

DATE _____

NAME _____
Last First Middle

ADDRESS _____
Number & Street City State

HOME PHONE _____ ZIP Code WORK/OTHER PHONE _____

SOC. SEC.# _____ Have you previously applied at the Stock Farm Club? _____

Do you have the legal right to work in the United States? YES NO You must show proof.

Immigration Status _____

Have you ever been convicted of a crime related to this position? YES NO If yes, please explain

Type of employment desired: _____ Fulltime _____ Part-time _____ Temporary _____ Seasonal

What position are you applying for? _____

What days of the week and hours during the day are you unavailable for work? Be specific: _____

EDUCATION

School, Address & Course of Study

High School: _____ Did You Graduate? Yes No If not, level completed _____

College: _____ Yes No _____

Graduate: _____ Yes No _____

Other (please specify): _____ Yes No _____

WORK HISTORY

Company (name & address): _____

Dates of employment: FROM _____ TO _____ Salary/Wage: _____

Supervisor: _____ Hours worked per week: _____

Position: _____ Skills acquired: _____

Reason for leaving: _____

Company (name & address): _____

Dates of employment: FROM _____ TO _____ Salary/Wage: _____

Supervisor: _____ Hours worked per week: _____

Position: _____ Skills acquired: _____

Reason for leaving: _____

Company (name & address): _____

Dates of employment: FROM _____ TO _____ Salary/Wage: _____

Supervisor: _____ Hours worked per week: _____

Position: _____ Skills acquired: _____

Reason for leaving: _____

Company (name & address): _____

Dates of employment: FROM _____ TO _____ Salary/Wage: _____

Supervisor: _____ Hours worked per week: _____

Position: _____ Skills acquired: _____

Reason for leaving: _____

Special Skills, Education: _____

Personal References (please list three references unrelated to you, and complete address & phone info)

FULL NAME	ADDRESS	PHONE	RELATIONSHIP
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APPLICANT'S ACKNOWLEDGMENT

Please read this section carefully and make sure that you fully understand it before signing it. This section affects your legal rights. If you have any questions regarding those legal rights, please ask them before you sign this application. If you do not ask, we will assume that you fully understood the language set forth below.

In exchange for Stock Farm's consideration of my employment:

I verify that all the information I have supplied in this application, and any other information, oral or written, is true and accurate. I understand that any misstated, misleading, incomplete, or false information is grounds for rejection of this application, refusal to hire, a withdrawal of an offer of employment, or immediate discharge without recourse, whenever and however discovered.

I hereby authorize Stock Farm, its agent or assigns, to contact my previous employers to request references. Further, I agree to hold Stock Farm and any such previous employer harmless for disclosure and authorize them to release any and all information pertaining to me and my employment.

I understand that Stock Farm maintains a drug-free workplace and that I will be given a copy of Stock Farm policies at the time that conditional offer of employment is made.

I acknowledge, and where applicable consent to, the following:

- É I am subject to a one year probationary period;
- É Stock Farm may conduct a criminal background, driver license, education, employment history, and professional license verifications, credit investigation, and check my references;
- É Work schedules may vary and can be unpredictable, and as such, I may be required to work a different shift, weekends, or overtime;
- É I will be required to comply with the policies and protocols set by the Stock Farm.
- É Stock Farm reserves the right to amend, change, and/or modify the policies protocols and benefits from time to time.
- É I will contact Stock Farm if I feel that I have been unlawfully discriminated against by an employee, supervisor, or manager in connection with my employment.

APPLICANT'S PRINTED NAME

APPLICANT'S SIGNATURE

DATE