

# APPLICATION FOR EMPLOYMENT

**DICK ANDERSON  CONSTRUCTION, INC.**

**3424 HIGHWAY 12 EAST - HELENA, MONTANA 59601 - (406) 443-3225  
4610 TRI-HILL FRONTAGE RD. - GREAT FALLS, MONTANA 59404 - (406) 761-8707  
705 BRIDGER DRIVE, SUITE A, BOZEMAN, MONTANA 59715 - (406) 586-0889**

## PERSONAL DATA

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Would you be available for out of town work? YES  NO   
Phone Number: ( ) \_\_\_\_\_ Message Phone: ( ) \_\_\_\_\_  
Position you are applying for: \_\_\_\_\_

## WORK EXPERIENCE

Company Name: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Describe Work Performed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Describe Work Performed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Describe Work Performed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_ Final Salary: \_\_\_\_\_

**EDUCATION**

High School/ G. E. D. Completed? YES  NO

**COLLEGE:**

Name of School: \_\_\_\_\_

Area(s) of Study: \_\_\_\_\_

Certificate Received: \_\_\_\_\_

**VOCATIONAL/TECHNICAL TRAINING:**

Name of School: \_\_\_\_\_

Area(s) of Training: \_\_\_\_\_

Months/Hours Completed: \_\_\_\_\_ Certificate Received: \_\_\_\_\_

**ADDITIONAL INFORMATION**

PLEASE USE THIS SPACE BELOW TO DESCRIBE ANY SPECIAL EQUIPMENT YOU HAVE USED, LICENSES, EXPERIENCE OR COMMENTS YOU HAVE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

**Work References:**

Company Name: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No.: ( ) \_\_\_\_\_

Company Name: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No.: ( ) \_\_\_\_\_

Company Name: \_\_\_\_\_

Name: \_\_\_\_\_ Phone No.: ( ) \_\_\_\_\_

**PERSONAL REFERENCES:**

Name: \_\_\_\_\_ Phone No.: ( ) \_\_\_\_\_

Name: \_\_\_\_\_ Phone No.: ( ) \_\_\_\_\_

PLEASE NOTE: Passing a pre-employment drug screen is a condition of employment at DAC.

⇒Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

SPACE BELOW FOR OFFICE USE ONLY

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## INVITATION TO SELF IDENTIFY

This employer is a Government contractor subject to Executive Order 11246, as amended. In accordance with the Executive Order, we will not discriminate against any employee or applicant because of race, color, religion, sex or national origin. This order also requires Government contractors to take affirmative action to ensure that applicants are employed, and that employees are treated during employment without regard to their race, color, religion, sex, or national origin.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. Information you submit will be kept confidential, except that Government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs (OFCCP) may be informed. The information provided will be used only in ways that are not inconsistent with Executive Order 11246, as amended.

### I IDENTIFY MYSELF AS A:

#### SEX:

- MALE
- FEMALE

#### RACE/ETHNICITY:

- WHITE
- BLACK
- HISPANIC
- ASIAN
- AMERICAN INDIAN

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_