



SPECIALTY CONSTRUCTION & ENVIRONMENTAL REMEDIATION SERVICES

ABATEMENT CONTRACTORS OF MONTANA, LLC

208 Commerce Street

Missoula, MT 59808

P 406-549-8489

F 406-728-9416

www.acm-contracting.com

EMPLOYMENT APPLICATION

APPLICANT INFORMATION

Last name: _____ First name: _____ Middle initial: _____ Date: _____

Street address: _____ Apartment/unit number: _____

City: _____ State: _____ Zip code: _____

Phone number: _____ Email address: _____

Date available: _____ Social security number: _____ Desired salary: \$ _____

Position applying for: _____

Are you looking for? Full time Part time Will you accept? Day shift Night shift Either

Are you a citizen of the United States? Yes No If no, are you authorized to work in the United States? Yes No

Have you ever worked for this company? Yes No If yes, when? _____

Have you ever been convicted of a felony? Yes No If yes, explain? _____

PREVIOUS EMPLOYMENT

Company: _____ Phone number: _____

Address: _____ Supervisor: _____

Job title: _____ Starting salary: \$ _____ Ending salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone number: _____

Address: _____ Supervisor: _____

Job title: _____ Starting salary: \$ _____ Ending salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone number: _____

Address: _____ Supervisor: _____

Job title: _____ Starting salary: \$ _____ Ending salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for leaving: _____

May we contact your previous supervisor for a reference? Yes No

EDUCATION

High school: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

REFERENCES (List three professional references)

Full name: _____ Relationship: _____
 Company: _____ Phone number: _____
 Address: _____

Full name: _____ Relationship: _____
 Company: _____ Phone number: _____
 Address: _____

Full name: _____ Relationship: _____
 Company: _____ Phone number: _____
 Address: _____

MILITARY SERVICE

Branch: _____ From: _____ To: _____
 Rank at discharge: _____ Type of discharge: _____
 If other than honorable, explain: _____

AUTHORIZATION

I certify the facts contained in this application are true and complete to the best of my knowledge, and I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give any and all information concerning my previous employment, and any pertinent information they may have, personal or otherwise, to you, and I release the company from all liability for any damage that may result from use of such information.

I also understand and agree that no representative of the company 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, unless it is in writing, and is signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act and other relevant state and federal laws.

Applicant printed name: _____ Applicant signature: _____
 Date: _____

Please submit to:

info@ACM-Contracting.com

OR

Human Resources
 Abatement Contractors of Montana, LLC
 208 Commerce Street
 Missoula, MT 59808

OR

Fax: 406-728-9416