CrossCurrents Fly Shop & Outfitters

crosscurrentsflyshop@gmail.com

www.crosscurrents.com

311 Bridge Street Craig, Montana 59648 406-235-3433 instagram.com/crosscurrents



326 N. Jackson Street **Helena**, Montana 59601 406-**449-2292**

 ${\it facebook.com/crosscurrents flyshop}$

EMPLOYMENT Application Form

Application Date:			
Full Name:			
Home Address:			
City:		State:	Zip:
Instagram:	FaceBool	<:	Other:
Position Applying For:			
Type of Employment: Full-Time (32+ hours/we			
Date Available to Start:	Until (End	d-Date for seasonal	work):
Have you ever been convicted of a felony?: [
May we contact your current employer?: \square	es , ☐ No If NO, please explain:		
Do you have a good driving record?: \square Yes,	☐ No If NO, please explain:		
Do you have Auto Insurance for yourself?: □	Yes , No If NO, please explain	n:	
Are you able to commute to work up to 45 mil	es?: 🗆 Yes , 🗆 No If NO, plea	ase explain:	
Do you consent to a pre-employment &/or ran	ndom qualified controlled sub	stance & alcohol scr	eening test?: Yes , No
Have you driven a vehicle towing a trailer/boa	at?: □ Yes , □ No.	Do you know ho	w to back up a trailer?: \square Yes , \square No.
Do you know how to drive an Manual Transm	ission?: ☐ Yes , ☐ No.	Do you know how	to row a Drift Boat/Raft?: \square Yes , \square No.
Fly Fishing Experience (List your experience	e -when you started, who got yo	ou started, places you'	ve fished, etc. Attach another sheet if needed
[Office Use Only: Date Received:	; Date Called:	; Interview	v Date(s):

(over) v-080123

Employer:	Supervisor:	Supervisor:		
		Phone:		
		Rate of Pay:		
Primary Duties:		•		
Dates Employed: Start:	End:			
Reason for leaving:				
Employer:				
		Phone:		
Position(s) Held:	Rate of F	^o ay:		
Primary Duties:				
Dates Employed: Start:	End:			
Reason for leaving:				
Employer:	Supervisor:			
	Phone:			
Position(s) Held:	Rate of Pay:			
Primary Duties:				
Dates Employed: Start:	End:			
Reason for leaving:				
Formal Education: (Please list your education and/	or training experiences)			
High School? ☐ No, ☐ YesSchool Name:		Graduation Date:		
College? ☐ No, ☐ Yes -School:	Major:	Graduation Date:		
Other:				
Other Skill or Experience: (Please list any other s	skills or experiences not mentioned above.)			
Personal References: (Please do NOT include rela	,			
		Occupation:		
City/State:	Phone:	Phone:		
Name:	Occupation:			
City/State:	Phone:	Phone:		
Name:	Occupation:	Occupation:		
City/State:	Phone:			
I authorize the investigation of all statements contained ir omission of facts by me is cause for dismissal at any time employers (unless otherwise indicated) and references a such contact.	e. I hereby give CrossCurrents, Inc permiss	ion to contact any or all schools, previous		
I understand that CrossCurrents, Inc.has a pre-employment employment. I further understand that my employment w myself or by CrossCurrents, Inc.				
Signature of Applicant:	Date:			