

CAREER SERVICES
MONTANA STATE UNIVERSITY-BILLINGS

PERSONAL DATA:

Name _____ Date _____

Current Address _____

City _____ State ____ Zip _____ Phone _____

Permanent Address _____

City _____ State ____ Zip _____ Phone _____

Graduation Date _____ Date Available for Employment _____

Type of Position Desired _____

EDUCATIONAL DATA: (most recent first)

Date	Institution	City/State	Degree Awarded/Expected
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Business/Arts & Sciences Candidates: Major _____ Minor _____

Teaching Candidates: Major _____ Minor _____

Undergraduate GPA: Cumulative _____ In Major _____

Graduate GPA : Cumulative _____ In Major _____

EMPLOYMENT EXPERIENCE: (most recent first)

Date	Firm/Institution	City/State	Job Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Pursuant to Title VII of the Civil Rights Act, Title IX of the Education Amendments, Section 504 of the Rehabilitation Act, Executive Order 11246 as amended, Vietnam Era and Disabled Veterans Act, as amended, and the Montana State Human Rights Act, Montana State University-Billings has a policy of nondiscrimination in employment and practices and in admission, access to and conduct of educational programs and activities. Discrimination is prohibited on the basis of race, sex, color, national origin, religion, age, disability, or marital status. Any student, employee, or applicant for admission or employment may file a discrimination grievance. Inquiries or grievances should be directed to the Human Resources/EEO-AA Director in McMullen 310; phone (406)657-2278.

Name _____

***STUDENT TEACHING/INTERNSHIP EXPERIENCE**

Subject/Grade/Internship	School/Agency	City/State	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Supervisor(s)

*Those with regular teaching experience, and non-teachers, omit this section.

AUXILIARY INFORMATION

HONORS AND AWARDS

EXTRA-CURRICULAR ACTIVITIES (INDICATE THOSE WHICH YOU ARE QUALIFIED TO DIRECT)

SCHOLARSHIPS

SPECIAL SKILLS AND ABILITIES

PROFESSIONAL ORGANIZATIONS

***REFERENCES**

Name	Title	School/Agency	City/State	Daytime Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

***New teaching candidates must include university supervisor and mentor teachers.**