

EMPLOYMENT APPLICATION
VILLAGE OF MOUNT HOREB
138 E MAIN STREET, MOUNT HOREB, WI 53572
(608) 437-6884 FAX (608) 437-3190

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Date:

APPLICANT INFORMATION

PLEASE PRINT IN INK AND COMPLETE ENTIRE APPLICATION.

Name (first, middle, last) _____

Address (street, city, state, zip code) _____

Day Telephone () _____ Evening Telephone () _____

Are there any other names under which you have worked or attended school? YES NO

If yes, please list for reference checking purposes: _____

Are you legally authorized to work in the U.S.? YES NO

(If hired, you will be required to provide proof of work authorization) _____

Are you at least 18 years old? YES NO

If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for, and have obtained a work permit. _____

Have you ever been convicted of a crime or pleaded no contest to any offense/violation other than minor traffic violations? YES NO

If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted.

(Convictions are not an automatic bar to employment) _____

Do you have any *pending* criminal charges against you? YES NO

If yes, describe the 1) nature of the charges 2) date issued and 3) county and state where issued: _____

Have you applied (YES NO) or worked for (YES NO) the Village of Mount Horeb before? _____

Do you have relatives currently employed with the Village of Mount Horeb? YES NO

If yes, please list name and relationship: _____

POSITION APPLYING FOR:

When can you start? _____

Are you able to perform all the essential functions/duties of the position you are applying for? (Please refer to position description). If no, please identify which essential functions you could perform with reasonable accommodation: _____

REQUIRED LICENSES

If required to drive a motor vehicle for the job you are applying for, please state your:

1) Driver's License # _____ 2) State issued: _____

2) Are you licensed by the state or with any group, association, or society relating to the position for which you are applying? YES NO If yes, specify: (license #, expiration date): _____

EDUCATION

<u>School Name</u>	<u>Name/Location</u>	<u>#of years</u>	<u>Study Course</u>	<u>Diploma/Degree Received</u>
High School				
College				
Graduate				
Other (specify)				

TRAINING COURSES

Please list any relevant training programs completed.

Course/Seminar Sponsoring Organization Content Date(s) attended

SPECIAL SKILLS

If relevant, please describe computer/software knowledge and office equipment experience:

If relevant, please describe motorized machinery/vehicle/tool use experience:

EMPLOYMENT HISTORY (START WITH MOST RECENT; USE SEPARATE SHEET IF NECESSARY)

Name of Employer _____ Telephone:() - _____

Address: _____

Job Title: _____ Employment Dates (month/year) From: _____ To: _____

Name of Immediate Supervisor: _____

Description of Duties: _____

Salary-start _____ Salary-end _____ Reason for leaving: _____

If currently employed, may we contact as a reference: YES NO

Name of Employer _____ Telephone:() - _____

Address: _____

Job Title: _____ Employment Dates (month/year) From: _____ To: _____

Name of Immediate Supervisor: _____

Description of Duties: _____

Salary-start _____ Salary-end _____ Reason for leaving: _____

If currently employed, may we contact as a reference: YES NO

Name of Employer _____ Telephone:() - _____

Address: _____

Job Title: _____ Employment Dates (month/year) From: _____ To: _____

Name of Immediate Supervisor: _____

Description of Duties: _____

Salary-start _____ Salary-end _____ Reason for leaving: _____

If currently employed, may we contact as a reference: YES NO

EMPLOYMENT REFERENCES

List individuals familiar with your job qualifications (no relatives or personal friends):

Name: _____ Relationship: _____

Day Telephone () _____ Evening Telephone () _____ How long known? _____

Address: _____

Name: _____ Relationship: _____

Day Telephone () _____ Evening Telephone () _____ How long known? _____

Address: _____

Name: _____ Relationship: _____

Day Telephone () _____ Evening Telephone () _____ How long known? _____

Address: _____

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS FORM

- 1) All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
- 2) I authorize the Village of Mount Horeb to investigate my responses on this application and contact any or all of my former employers or individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly release and hold harmless any person or organization that provides information pertaining to me or my employment.
- 3) I understand that upon receiving a job offer a physical examination and drug screening may be required. (Note: If this is a job requirement, you will be notified).
- 4) Regardless of whether or not I become employed by the Village of Mount Horeb, I recognize that this application is not and should not be considered a contract of employment. I understand that employment with the Village of Mount Horeb is on an at-will basis, and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the Village of Mount Horeb's, unless specifically provided otherwise in a written employment contract.

Applicant's Signature

Date

THANK YOU FOR YOUR INTEREST IN THE VILLAGE OF MOUNT HOREB.