



# APPLICATION FOR EMPLOYMENT

## PERSONAL INFORMATION

Position Applied For:			
Name:			
Last	First	Middle	
Address:			
Number/Street	City	State	Zip Code
Phone Number:		Email Address:	

## GENERAL BACKGROUND INFORMATION

	Yes	No			
Do you have the legal right to work in the United States?					
Have you ever been employed by the Village of Wrightstown? If yes, please give dates of employment:					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">From:</td> <td style="width: 25%;">To:</td> <td style="width: 50%;">Position Held:</td> </tr> </table>	From:	To:	Position Held:		
From:	To:	Position Held:			
Do you have any relatives currently employed by the Village of Wrightstown? If yes, please give name, relationship, department and position:					
Foreign language (spoken or read with proficiency):					
Have you ever been convicted of a misdemeanor (including driving-related misdemeanors such as driving under the influence, reckless driving and driving on a suspended license) or a felony? If yes, please explain and give city, state, disposition and dates: <i>(An affirmative response will not in and of itself disqualify you from employment with the Village)</i>					

## EDUCATIONAL BACKGROUND

Indicate highest level of education completed: High School: _____ College: _____ Graduate School: _____					
Name of College/University	Location	Hours Completed	Degree Earned	Major	Dates Attended
Other (Technical, Vocational, Business etc...)					

## LICENSES AND CERTIFICATIONS

License/Certification - Driver's License Number	State	Expiration
Type of driver's license: Standard <input type="checkbox"/> Commercial (DCL) <input type="checkbox"/> Class _____		
List any licenses/certifications or other authorization you possess to practice a trade or profession including state and expiration date		

## PRIOR EMPLOYMENT

Have you ever been warned/disciplined for any of the following occurrences in your previous or current employment?

	Yes	No
Attendance? If yes, please explain:		
Performance Problems? If yes, please explain:		
Safety violations? If yes, please explain:		
Harassment? If yes, please explain:		
Violent Behavior? If yes, please explain:		
Inability to get along with others? If yes, please explain:		
Inappropriate use or possession of alcohol? If yes, please explain:		
Inappropriate use or possession of a drug? If yes, please explain:		
Have you ever been suspended from any positions? If yes, please explain:		

## EMPLOYMENT AND VOLUNTEER EXPERIENCE

The application for employment and any supplementary experience forms must be completed. A resume may be attached. Starting with your most recent position, describe all paid, military and applicable volunteer experience. Describe those duties and responsibilities which best demonstrate your qualifications for this position.

Please indicate the number of attachments: \_\_\_\_\_

May we contact your current employer? Yes  No

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone Number:	Type of Business:
Dates of Employment: From _____ To _____	Hours per Week: _____ Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Reason for Leaving:	Volunteer <input type="checkbox"/> Current Salary: _____

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone Number:	Type of Business:
Dates of Employment: From _____ To _____	Hours per Week: _____ Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Reason for Leaving:	Volunteer <input type="checkbox"/> Ending Salary: _____

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone Number:	Type of Business:
Dates of Employment: From _____ To _____	Hours per Week: _____ Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Reason for Leaving:	Volunteer <input type="checkbox"/> Ending Salary: _____

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone Number:	Type of Business:
Dates of Employment: From _____ To _____	Hours per Week: _____ Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Reason for Leaving:	Volunteer <input type="checkbox"/> Ending Salary: _____

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone Number:	Type of Business:
Dates of Employment: From _____ To _____	Hours per Week: _____ Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Reason for Leaving:	Volunteer <input type="checkbox"/> Ending Salary: _____

## AUTHORIZATION AND CERTIFICATION

Please read and initial each of the following statements. If you have a question regarding any of these statements, ask a Village of Wrightstown representative prior to initialing and signing the application. Your initials and signature verify that you have read, understand and agree to abide by these statements.

Initial: \_\_\_\_\_ I authorize any person contacted to provide the Village of Wrightstown any and all information regarding my employment, education and other information concerning any of the subjects covered by the application, which may include, but not be limited to, application of employment, performance evaluations, work records excluding workers compensation, if any, wage rates, supervisors' comments, results of any and all non-medical tests, disciplinary reports or letters, and complaints or allegations raised against me, regarding any misconduct. I agree to execute release authorization forms as required by the Village of Wrightstown to request employment records from any present and/or former employer(s). I release and hold harmless the Village of Wrightstown, their officers, agents and employees, and the person(s) providing the information, from any liability related to the providing of this information.

Initial: \_\_\_\_\_ I understand that after receiving a conditional offer of employment, I may be required to successfully pass pre-employment and post-employment exams to gain employment or continue employment with the Village of Wrightstown. I consent freely and voluntarily to participate in required drug tests and/or a pre-employment physical exam, at a location selected by the Village of Wrightstown, and consent to the release of the test results to the Village of Wrightstown. I hereby release and hold harmless, the Village of Wrightstown, their officers, agents and employees, and the laboratory employees, agents and contractors, from any liability whatsoever, arising from the drug tests and/or a pre-employment exam, and decisions concerning employment based on upon the results of the tests.

Initial: \_\_\_\_\_ I authorize the Village of Wrightstown, its officers, agents, and employees, to conduct a background criminal check and a check with the Department of Transportation prior to making a decision regarding employment. I release and hold harmless the Village of Wrightstown, their officers, agents, and employees, and the person(s) providing the information, from any liability related to the performance or result of this check. I recognize that this information will be considered by the Village of Wrightstown, only if it substantially relates to the position applied for.

Initial: \_\_\_\_\_ If accepted for employment, I agree that my status as an employee depends upon my successful performance. I understand that just as I am free to resign at any time, for any or no reason, the Village of Wrightstown reserves the right to terminate my employment at any time, for any or no reason. All employees are considered at-will employees.

Initial: \_\_\_\_\_ I agree to use such personal protective equipment and devices as may be required by the Village of Wrightstown and to comply with safety rules and requirements. In addition, I understand that the Village of Wrightstown maintains a workplace free from drugs, harassment and violence.

Initial: \_\_\_\_\_ I understand that nothing contained in the application, the granting of an interview, or an offer/acceptance of employment, constitutes an employment contract. I understand that no representative of the Village of Wrightstown, has the authority to make any assurances to the contrary.

I hereby certify that all statements made on or in connection with my application are true, complete and correct, to the best of my knowledge and belief. I understand and agree that any misstatements or omissions of material fact may subject me to disqualification, or, if hired, dismissal. **Notice - Wisconsin Open Records Law: Under section 19.36(7) of Wisconsin Statutes, the names of the "Final Candidates" must be open to public inspection. The statute also provides that if an applicant does not want his/her name revealed prior to being a "Final Candidate" they can do so by making a separate request in writing.**

The Village of Wrightstown is committed to the equality of opportunity for all people. It is the policy of the Village of Wrightstown to provide equal employment opportunities for all individuals on the basis of their skills, abilities and qualifications, without regard to race, color, national origin, religion, political affiliation, sex, age, disability, marital status, arrest or conviction record, sexual orientation, disabled veteran or covered veteran status, membership in the National Guard or any other reserve component of the United States or state military forces, use or nonuse of lawful products off the employer's premises during non-working hours, or any other factors prohibited by law.

---

Appliant's Signature

Date