

Mailing address: Town Administrator 1293 Washington Avenue Cedarburg, WI 53012 Telephone: 262-377-4509

Fax: 262-377-0308

APPLICATION FOR EMPLOYMENT

Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, religion, age, sex, handicap, disability, veteran status, marital status, sexual orientation, or any other characteristic protected by law.

WE ARE AN EQUAL OP	PORTUNITY EMP	LOYER.		
	Date			
Name				
Last		First	Middle	
Street Address				
		State	Zip	
Telephone				
E-mail				
Position for which you are	applying:			
Can you with or without re	asonable accommo	dation perform the essential functi	ions of the job for which you are	
applying? YesNo	<u> </u>			
What source led you to ma	ke application with			
us?				
Have you previously applie	ed for employment	with the Town? Yes No	_	
If yes, when?				
Are any of your relatives p	resently employed l	by the Town? YesNo		
If yes, please provid	de name and position	n:		
EMPLOYMENT HISTO	RY (List present or	most recent employer first)		
Employer	Employed	Type of work performed	Present or Reason for	

Employer	Employed	A.T	Present or	Reason for
			last salary	Leaving
Address/City	from			
	mo./yr.			
Name of supervisor	to			
_	mo./yr.			

Employer Address/City	Employed from	Type of work performed	Present or last salary	Reason for Leaving
J	mo./yr.			
Name of supervisor	to_ mo./yr.	_		
Employer	Employed	Type of work performed	Present or last salary	Reason for Leaving
Address/City	from_ mo./yr.			
Name of supervisor	to mo./yr.	_		
Employer	Employed	Type of work performed	Present or last salary	Reason for Leaving
Address/City	from_ mo./yr.			5
Name of supervisor	to mo./yr.	_		

Please account for any periods of unemployment other than when you were in school:

EDUCATION

School	Name & Location of	Circle Last	Major	Diploma
	School	Year	Course	and/or
		Completed		Degree?
High School		9 10 11 12		
College		1 2 3 4 more		
Business or Trade School		Months Attended		

If you served in the U.S. Armed Forces, briefly describe skills acquired: _____

PERSONAL INFORMATION

Are you legally authorized to work in the U.S	.? YesNo
	ments to verify your identity and eligibility for employment in Control Act and your employment is contingent upon furnishing
Name, address and telephone number of some emergency:	cone other than a household member we can contact in case of
Are you at least 18 years of age? Yes No	
	y or no contest to any violation of law other than a minor traffic es not automatically bar you from employment.)
If yes, give details:	
If you possess any certifications or specific tra	aining please list:
	tion?
	If so, may we contact your present employer? Yes No
If hired, when would you be available?	Salary requirements?
	pplication for employment is true and correct to the best of my knowledge. e cause for rejection or may be cause for subsequent dismissal if I am hired.
employees and agents to release any and all information employees and agents, or any other person or entity employment information may include, but is not no	inployer, person, firm, corporation, school or government agency, its officers on concerning my former employment to any prospective employer, its officers making a written or oral request for such information. I understand that the decessarily limited to, performance evaluations and reports, job descriptions regarding my suitability for employment possessed by it.
corporation, school or government agency, its officers action, damages, or costs, including attorneys' fees, arising from or incident to the disclosure or release except the control of the con	ge, absolve, indemnify and hold harmless such former employer, person, firms, employees and agents from any and all claims, liability, demands, causes of present or future, whether known or unknown, anticipated or unanticipated cept for the malicious and willful disclosure of derogatory facts concerning menting me from obtaining employment which the officer, employee or agent
I understand that any offer of employment is cand satisfactory completion of any required pl	contingent upon successful completion of the background check hysical examination and/or drug test.
Signature:	Date

<u>REFERENCES</u>	
Name of Reference	
Occupation	
Address	
City, State, Zip	
Telephone	
REFERENCES	
Name of Reference	
Occupation	
Address	
City, State, Zip	
Telephone	
REFERENCES	
Name of Reference	
Occupation	
Address	
City, State, Zip	
Telephone	