

APPLICATION FOR EMPLOYMENT

Please print, complete, and return to:

VILLAGE OF NEWBURG
620 Main, PO Box 50, Newburg, WI 53060
Clerk@village.newburg.wi.us

POSITION APPLIED FOR: _____ **DATE:** _____

PERSONAL INFORMATION

Last Name: _____ First Name: _____ M.I. ____

Nickname / What you prefer to be called: _____

Address: _____ City/State: _____ Zip: ____

Phone: _____ home / mobile Phone: _____ home / mobile

Email Address: _____

EDUCATION

If ALL of the following information is included in your attached resume, check here: _____ and you may skip completing this section.

High School attended, with location: _____

Did you graduate? _____ Did you complete a GED Certificate? _____

University / College / Tech Schools attended, with location:

School	City and State	Degree and Major / Area of Study	Graduated?

SPECIAL SKILLS, TRAINING, LICENSES, CERTIFICATIONS

If ALL of the following information is included in your attached resume, check here: _____ and you may skip completing this section.

WORK HISTORY – To share information about more than three positions, please add copies of this page.

If ALL of the following information is included in your attached resume, check here: _____ and you may skip completing this section.

Position Title: _____ Start Date: _____ End Date: _____
Name of Employer: _____ Department: _____
Address of Employer: _____ City/State: _____
Job Duties / Accomplishments: _____

Salary / Wages: \$ _____ per _____ for _____ hours per week.
Reason for Leaving: _____
May we contact this employer / supervisor? ___ Yes ___ No
Name of Supervisor: _____ Title of Supervisor: _____
Supervisor's Phone and Email: _____

Position Title: _____ Start Date: _____ End Date: _____
Name of Employer: _____ Department: _____
Address of Employer: _____ City/State: _____
Job Duties / Accomplishments: _____

Salary / Wages: \$ _____ per _____ for _____ hours per week.
Reason for Leaving: _____
May we contact this employer / supervisor? ___ Yes ___ No
Name of Supervisor: _____ Title of Supervisor: _____
Supervisor's Phone and Email: _____

Position Title: _____ Start Date: _____ End Date: _____
Name of Employer: _____ Department: _____
Address of Employer: _____ City/State: _____
Job Duties / Accomplishments: _____

Salary / Wages: \$ _____ per _____ for _____ hours per week.
Reason for Leaving: _____
May we contact this employer / supervisor? ___ Yes ___ No
Name of Supervisor: _____ Title of Supervisor: _____
Supervisor's Phone and Email: _____

MILITARY SERVICE

If ALL of the following information is included in your attached resume, check here: _____ and you may skip completing this section.

Branch of Service: _____ Start Date: _____ to End Date: _____

Active Duty or Reserve: _____ Highest Grade/Position: _____

Type of Discharge: _____ Skill Specialty/MOS: _____

Special schools attended or skills acquired: _____

ADDITIONAL INFORMATION

Do you have a valid Wisconsin Driver’s License? _____ YES _____ NO

Do you have a valid Commercial Driver’s License (CDL)? _____ YES _____ NO

Note: Driver’s License information will only be considered if it relates to the position you are applying for.

Have you ever been convicted of a felony? _____ YES _____ NO

...If yes, please attach a separate page providing a full explanation including dates and location.

Are you now, or have you ever been, employed by the Village of Newburg? _____ YES _____ NO

...If yes, please explain: _____

Are you related to, or in a business relationship with anyone employed with the Village of Newburg, anyone who is appointed to a government committee for the Village, or anyone who serves as an elected official for the Village? _____ YES _____ NO

...If yes, please explain: _____

Do you intend to be employed by another employer while working for the Village of Newburg?

(Is this a 2nd job, or do you plan to have another position that will be your 2nd job?)

_____ YES _____ NO

...If yes, please explain: _____

Have you ever been fired or asked to resign from a job? _____ YES _____ NO

...If yes, please explain: _____

...and did you learn something from that experience? _____

Have you worked in a position supervising other employees? ____YES ____NO

What do you hope for in a supervisor that you report to? _____

What type of work are you seeking? ____ Full-time ____ Part-time ____ Temporary
Describe how many hours per week, and the days/times you are available for work: _____

Are there any times you are certainly NOT available for work? _____

What level of salary / compensation do you require if offered this position?
Minimum requirement: \$ _____ Would be happy to be offered \$ _____

Is there anything else you want the Village to know in order to evaluate you as a candidate for this position? _____

CERTIFICATION BY APPLICANT: PLEASE READ CAREFULLY AND SIGN BELOW

All information provided and statements made by me as part of this application, or as part of any additional information provided in support of this application, are complete, correct and true to the best of my knowledge. I understand that if I am selected for employment, false or misleading information provided or false statements made as a part of this application may be considered as cause for dismissal.

Signature of Applicant

Date Signed

IDENTITY DISCLOSURE

Sign and date below if you wish for the Village to NOT disclose your identity as an applicant if asked by the media or members of the public.

Under the provisions of §19.36, Wisconsin Statutes, I request that my identity as an applicant for employment not be revealed without my consent or until required under law.

Signature of Applicant

Date Signed

REFERENCES

If ALL of the following information is included in an attached list of references, check here: _____ and you may skip completing this section.

Name of Reference: _____

Position/Title/Profession: _____

Email Address: _____ Phone: _____

How long has this person known you? _____

What is your relationship to this person / how do they know you? _____

What do you believe this person will tell us about you? _____

Name of Reference: _____

Position/Title/Profession: _____

Email Address: _____ Phone: _____

How long has this person known you? _____

What is your relationship to this person / how do they know you? _____

What do you believe this person will tell us about you? _____

Name of Reference: _____

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EMPLOYING AGENCY:
VILLAGE OF NEWBURG
620 Main, PO Box 50, Newburg, WI 53060
Clerk@village.newburg.wi.us

AUTHORIZATION FOR RELEASE OF INFORMATION

(For official use only, not to be released to unauthorized persons)

I hereby empower an employee of the Village of Newburg or other authorized representative thereof bearing this release to, within one year of its date, obtain information and records pertaining to me from any or all of the following sources:

1. Municipal, State, or Federal law enforcement agencies
2. Selective Service System
3. Any banking institution
4. Any place of business (for purposes of obtaining credit or employment data)
5. Credit rating bureaus or institutions maintaining individual credit rating files
6. Any previous employer
7. Present employer
8. Any school, college, university or other educational institution
9. Any law enforcement or jail officer

Exceptions to this blanket authorization:

1. Any medical information in the possession of any source named above until subsequent to a conditional offer of employment (per Americans with Disabilities Act).
2. _____
3. _____

This release is executed to authorize the Village of Newburg, as a prospective employer, to obtain the above information. It is understood that said information shall be used only in consideration of my employment and shall not be further disseminated for any purpose. If employment is denied due to information obtained on a credit report, I understand that I can receive this information by calling toll free (800) 888-4213.

Signature *Date* *Name (first, middle initial, last)*

Date of Birth *Address (Street and Number)*

Sex: Male Female _____
City / State *Zip*

Driver's License Number

Witness (signature and name): _____