

CITY OF MINERAL POINT

137 High St.

Mineral Point, WI 53565

EMPLOYMENT APPLICATION

Position applied for: _____

Applicants are considered for all positions without regard to race, color, sex, sexual orientation, religion, creed, national origin, ancestry, age, marital or veteran status, disability, handicap, arrest or conviction record (if conviction is not substantially related to the duties of the position), and the City does not discriminate against any person on any basis prohibited by state or federal law.

Date _____

(Please Print)

Name: _____

Address: _____

Telephone: Home _____ Work _____

Email Address: _____

Are you employed now? _____ Yes _____ No

May we contact your present employer? _____ Yes _____ No

On what date would you be available for work? _____

Are you eligible to work in the United States? _____ Yes _____ No

(If offered employment, you will be required to provide documentation to verify eligibility.)

Have you been convicted of a crime (do not include minor traffic violations or ordinance violations)?

_____ Yes _____ No

(You must report all convictions, past and present. A conviction will not automatically disqualify you from employment but any dishonesty relevant to this response will remove your application from further consideration or result in termination of your employment.)

If yes, please explain _____

List professional trade, business or community activities and offices held.

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____

2. _____

3. _____

EDUCATION AND FORMAL TRAINING

Do you have a high school diploma or GED certificate? Yes _____ No _____

Colleges, military, trades, business or other schools attended:

Name & Location	Course of Study	Dates	Degree/Diploma
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Licenses or Certificates you have that indicate specialized skills or training:

Title of License or Certificate	Issuing Agency	Skill Area
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Are there any special skills you have that you would like us to be aware of?

WORK EXPERIENCE

Start with your present or last job. Include intern or volunteer work as well as full-time or part-time employment.

Employer	Address
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Your Title	Supervisor's Name & Telephone Number
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Duties: _____

Date of Employment: From _____ to _____.

Reason for Leaving:

Employer _____ Address _____

Your Title _____ Supervisor's Name & Telephone Number _____

Duties: _____

Date of Employment: From _____ to _____.

Reason for Leaving:

Employer _____ Address _____

Your Title _____ Supervisor's Name & Telephone Number _____

Duties: _____

Date of Employment: From _____ to _____.

Reason for Leaving:

SUPPLEMENTAL QUESTIONS:

1) How would you work with the public:

2) How would you manage employees?

3) How would you handle record keeping?

By signing below, I certify that all statements made on this application are true and correct. I understand that all information is subject to verification. I also understand that any falsification may disqualify me from employment, or if already employed, may result in dismissal. My signature authorizes the City of Mineral Point to secure my driving record (if position requires driving), transcripts from educational institutions to verify credits/degrees and employment-related information from former employers or references. Upon a conditional offer of employment being made, I understand I will be required to provide any information needed to complete a criminal background check. I understand that I may be asked to undergo a physical examination, including substance abuse screening, prior to appointment to a position with the City of Mineral Point; I also understand that refusal to participate will result in the withdrawal of any offer of employment.

Signature: _____ Date: _____