



EMPLOYMENT APPLICATION

4205 Rivermoor Road
Omro, WI 54963
Phone - 920-685-2111

1. Application form must be submitted to be considered for employment.
2. Answer all questions — complete application.
3. Date and sign the application on last page.
4. Attach resume and additional information as necessary.
5. Return to above address.
6. Applications will be kept in an active file for twelve months.

The Town of Omro is an Equal Opportunity Employer and fully subscribes to the principles of Equal Employment Opportunity. It is the policy of the Town to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, sexual orientation, age, sex, veteran status or disability, or any other basis prohibited by Federal or State law. As an Equal Opportunity Employer, the Town intends to comply fully with all Federal and State laws and the information requested on this application will not be used for any purpose prohibited by law.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Do you currently possess a valid drivers license? YES NO License Number: _____

Have you ever worked for this company? YES NO If yes, when?

Have you ever been convicted of a felony? YES NO

If yes, explain:

[Type here]

[Type here]

List any other names by which you have been known on official records. _____
 Please list all convictions (including felonies and misdemeanors). Exclude minor traffic offenses and convictions prior to your 18th birthday. Conviction is not an automatic bar to employment. Each case is considered on its individual circumstances. I understand that a subsequent discovery by the Town of false or incomplete information may be considered grounds for termination.

| Date | Charge | Place | Court | Action Taken |
|------|--------|-------|-------|--------------|
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Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Training beyond high school (college or university, business college, military or other training you have received). Indicate credits earned or completed.

| Name and Location | Full or Part Time | Dates Attended | | Credits Earned | Major Fields of Study | Degree and Dates |
|-------------------|-------------------|----------------|----------|----------------|-----------------------|------------------|
| | | From Mo/Yr | To Mo/Yr | | | |
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[Type here]

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain:

[Type here]

References

Please list three professional references. Examples include additional supervisors not listed previously or volunteer coordinators/lead workers knowledgeable of your work performance. Do not include personal friends or relatives.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Disclaimer and Signature

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application or given to the employer through the application process may be considered sufficient cause for dismissal. I am aware that a thorough investigation of my entire background is to be conducted. I hereby authorize and request the release of any and all information concerning me (including a transcript of any academic record) to the Town of Omro or its agent upon presentation of this or copy hereof. I understand that the background check might be done either before or after an employment decision is reached and in fact could conceivably be done on multiple occasions during employment.

In addition, I authorize all employers and other parties, whether named in my application or not, to provide information to the Town of Omro and/or its agents. A photocopy of this authorization is as effective as the original.

Signature: _____ Date: _____

Thank you for completing this application and for your interest in employment with the Town of Omro. We would like to assure that your opportunity for employment with the Town of Omro will be based solely on your merit and on no other consideration.