## **TOWN OF MINOCQUA**

## Application for Employment



APPLICANT INFORMATION												
Last Name				First	First			M.I.	Date			
Street Address									Apartment/Unit #			
City				State	State				ZIP			
Phone				E-mail	E-mail Address							
Date Available Social Se			curity No.	urity No. De			sired Salary					
Position Applied for												
Are you a citizen of the United States? YES N					O  If no, are you authorized to work in the U.S.? YES  NO							
Have you applied t	o work for us be	NO 🗌	If so, when?									
Have you ever bee	NO 🗌	If yes, explain										
EDUCATION												
High School	igh School A			Address								
From	То	Did you graduate?		YES 🗌	NO Degree							
College			Address	ress								
From	То	Did you g	aduate?	YES 🗌	ES NO Degree							
Other	Other A			Address	ddress							
From	То	Did you g	aduate?	YES	ES NO Degree							
REFERENCES												
Please list three professional references.												
Full Name		R	Relationship									
Company					P	none (	)					
Address												
Full Name					Relationship							
Company					P	Phone ( )						
Address												
Full Name		R	Relationship									
Company			P	none (	)							
Address												

PREVIOUS EMPLOYMENT										
Company	Phone ( )									
Address	Supervisor									
Job Title			Starting Salary	\$		\$				
Responsibilities										
From	То	Reason for Leaving	1							
May we contact yo	ur previous superv	visor for a reference?	NO 🗆							
Company			Phone ( )							
Address	Supervisor									
Job Title	Job Title			\$		Ending Salary	\$			
Responsibilities										
From	То	Reason for Leaving								
May we contact your previous supervisor for a reference? YES NO										
Company			Phone ( )							
Address	Supervisor									
Job Title	\$		Ending Salary	\$						
Responsibilities										
From	То	Reason for Leaving								
May we contact your previous supervisor for a reference? YES NO										
MILITARY	SERVICE									
Branch				From	То					
Rank at Discharge				Type of Discharge						
If other than honorable, explain										
DISCLAIMER, AUTHORIZATION AND SIGNATURE										
I certify that my answers are true and complete to the best of my knowledge.										
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.										
I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the Town of Minocqua from all liability for any damage that may result from utilization of such information.										
Signature						Date				