

CITY OF CUBA CITY

108 N. Main St.

Cuba City, WI 53807

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 or arrest or conviction record.

Date _____

(Please Print)

Name: _____

Address: _____

Telephone: Home _____ Work _____

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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Licenses or Certificates you have that indicate specialized skills or training:

Title of License or Certificate	Issuing Agency	Skill Area
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

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: _____

Employer

Address

Your Title

Supervisor's Name & Telephone Number

Duties: _____

Date of Employment: From _____ to _____.

Reason for Leaving: _____

SUPPLEMENTAL INFORMATION

1) Describe your experiences working with the public: _____

2) List computer programs that you are familiar with: _____

3) This position will require attendance at some evening meetings and will occasionally require overnight travel. What is your availability in these situations? _____

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 will disqualify me from employment, or if already employed, will result in dismissal. My signature authorizes the City of Cuba City to secure my driving record (if position requires driving), transcripts from educational institutional institutions to verify credits/degrees, employment-related information from former employers or references, and 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 Cuba City; I also understand that refusal to participate will result in the withdrawal of any offer of employment.

Signature _____

Date _____