

# EMPLOYMENT APPLICATION

Village of Summit  
2911 N. Dousman Road  
Oconomowoc, WI 53066  
Phone 262.567.2757 • Fax: 262.567.4115

The Village of Summit is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, nationality, disability, veteran status, or any other status protected under local, state or federal law.

This application may be supplemented with a resume or other materials that the applicant feels will assist the Village in reviewing the applicant's qualifications and/or experience.

## PLEASE PRINT IN INK

(Application must be completed in full even if attaching a resume.)

Date: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

## APPLICANT DATA

Full Name \_\_\_\_\_

Last

First

Middle

Address \_\_\_\_\_

City

State

Zip

Daytime Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Evening Phone ( \_\_\_\_\_ ) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Social Security Number (used for purposes of background check only) \_\_\_\_\_

## GENERAL INFORMATION

Type of employment desired:     Full-time     Part-time     Temporary     Seasonal

Date available to start: \_\_\_\_\_

Salary/wage desired: \_\_\_\_\_

Have you ever applied for employment with the Village of Summit before?     Yes     No

If yes, give date and position applied for: \_\_\_\_\_

Have you ever been employed with the Village of Summit?     Yes     No

If yes, give date and position: \_\_\_\_\_

Are any of your relatives presently employed with the Village of Summit?     Yes     No

If yes, give name, relationship and position: \_\_\_\_\_

## GENERAL INFORMATION con't

If you are under 18 and we require a work permit can you furnish one?  Yes  No

Only U.S. citizens or aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, provide genuine documentation establishing your identity and eligibility to be legally employed in the United States?  Yes  No

Have you ever been convicted of a crime?  Yes  No  
(A conviction record will not automatically bar you from employment and will only be considered as it relates to the particular job in question.)  
If yes, please explain: \_\_\_\_\_

Have you been convicted of any driving or traffic offenses during the last five years?  Yes  No  
(For positions that require driving only). "Driving or traffic offenses" include non-criminal traffic offenses. A conviction record will not automatically bar you from employment and will only be considered as it relates to the particular job in question.)  
If yes, please explain: \_\_\_\_\_

Are any criminal charges or proceedings pending against you?  Yes  No  
(A pending criminal charge will not automatically disqualify you from employment and will only be considered as it relates to the particular job in question.)  
If yes, please explain: \_\_\_\_\_

Have you ever been discharged from any employment or asked to resign?  Yes  No  
If yes, please explain: \_\_\_\_\_

Can you, with or without reasonable accommodation, perform the essential functions of this job?  Yes  No

Do you have a valid Driver's License? (for positions that require driving only)  Yes  No  
If yes, Driver's License Number: \_\_\_\_\_

Are you currently using illegal drugs?  Yes  No

## EDUCATION

**High School:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**# of Years Completed:** \_\_\_\_\_ **Did you graduate?**  Yes  No

**College/University:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**# of Years Completed:** \_\_\_\_\_ **Did you graduate?**  Yes  No **Degree:** \_\_\_\_\_

**Other:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**# of Years Completed:** \_\_\_\_\_ **Did you graduate?**  Yes  No **Degree:** \_\_\_\_\_

Have you received any job-related training in the United States Military?  Yes  No  
Please describe: \_\_\_\_\_

Describe any specialized training, apprenticeships, certifications, licenses or skills: \_\_\_\_\_

## EMPLOYMENT HISTORY

Begin with current or most recent position and continue with all past employment, attach additional sheet if necessary. Please explain all gaps in employment history.

### **Employer 1**

Dates of Employment: From \_\_\_ / \_\_\_ / \_\_\_ To \_\_\_ / \_\_\_ / \_\_\_ Position(s) Held: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary/Wage: \_\_\_\_\_ Ending Salary/Wage: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

### **Employer 2**

Dates of Employment: From \_\_\_ / \_\_\_ / \_\_\_ To \_\_\_ / \_\_\_ / \_\_\_ Position(s) Held: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary/Wage: \_\_\_\_\_ Ending Salary/Wage: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

### **Employer 3**

Dates of Employment: From \_\_\_ / \_\_\_ / \_\_\_ To \_\_\_ / \_\_\_ / \_\_\_ Position(s) Held: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary/Wage: \_\_\_\_\_ Ending Salary/Wage: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

## PERSONAL REFERENCES

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

## NOTIFICATION AND AGREEMENT

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is true and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery. I agree that The Village of Summit shall not be held liable in any respect if I am denied employment or my employment is terminated because of false statements, answers or omissions made by me on this Application for Employment or any other document.

It is the policy of the Village of Summit to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, gender, national origin, marital status, expunged juvenile records or pregnancy and to afford equal opportunities to disabled veterans, veterans of the Vietnam Era, and individuals with a disability and any other characteristics protected by Federal, State or Local law.

I understand that if offered a position with the Village of Summit I may be required to submit to a pre-employment medical examination, drug screening and/or background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

In consideration for employment with the Village of Summit, if employed, I agree to conform to the rules, regulations, policies and procedures of the Village of Summit at all times and understand that such compliance is a condition of employment.

I understand that this application is considered current for thirty (30) days. If I wish to be considered for employment after this period, I must fill out and submit a new application.

I authorize any and all schools, former employers, references, courts, and any others who have information about me to provide such information to the Village of Summit and/or any of its representatives, agents or vendors. I understand that the information may include but is not necessarily limited to performance evaluations and reports, job descriptions, disciplinary reports, letters of reprimand, and opinions regarding my suitability for employment possessed by it.

I fully release and discharge, absolve, indemnify and hold harmless all parties involved from any and all claims, liability, demands, causes of action, damages or costs including attorney fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release except for the malicious and willful disclosure of derogatory facts concerning my employment made for the express purpose of preventing me from obtaining employment which the party disclosing such facts knows are untrue.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied by me on this application and any other accompanying or required documents.

**APPLICANT SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_