## VILLAGE OF ELLSWORTH

130 N CHESTNUT STREET, ELLSWORTH, WI 54011 | PHONE 715-273-4742 | FAX 715-273-6460

		Applicant Ir	ntormatio	n			
Full Name:					Date	:	
	Last	First			M.I.		
Address:							
	Street Address					Apartment/Unit #	
	City				State	Zip Code	
Phone:		Em	ail:				
Date Availa	ble:	Social Security No.:			_ Desired Salary:	\$	
Position App	olied for:						
YES NO Are you a citizen of the United States?  YES NO Are you authorized to work in the U.S.?							
Have you ever worked for the Village of YES NO Ellsworth before? If yes, when?							
*You will not be denied employment solely because of a conviction record unless the circumstances of the offense are substantially related to the job for which you have applied.							
		Educo	ation				
High Schoo	l:						
	To:		YES N	10			
College:		Address:					
From:	To:	Did you graduate?	YES N	10	Degree:		
Other:		Address:					
From:	To:	_	YES N	IO [	Degree:		
		Refere	nces				

Please list two professional references.

Full Name: _		Relationship:
Company:		Phone:
Address:		
· –		
Full Name: _		Relationship:
_		Phone:
Address:	<del>-</del>	
	Previous Employment	
Company: _		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:\$	Ending Salary:\$
D :1:11:1:		
Kesponsibilitie	es:	
From:	To: Reason for Leaving:_	
	YES NO	
May we conto	act your previous supervisor for a reference?	
Company:		Phone:
Address:		Supervisor:
_		<u> </u>
Job Title: _	Starting Salary:\$	Ending Salary: <u>\$</u>
Posponsibilitio	es:	
Kesponsibililie		
From:	To: Reason for Leaving:_	
	YES NO	
May we conto	act your previous supervisor for a reference?	
Company: _		Phone:
Address:		Supervisor:
_		
Job Title: _	Starting Salary:\$	Ending Salary:\$
Responsibilitie	oc.	
	es:	
From:	To: Reason for Leaving:_	

YES	NO
IES	NO

May we contact your previous supervisor for a reference?

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge and understand that 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 reference listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Signature:	Date:
	<u> </u>