



N112W17001 Mequon Road  
Germantown, WI 53022  
262-250-4700

## APPLICATION FOR EMPLOYMENT

Position Applied For:			
First Name	M.I	Last Name	
Residence- Street Address		City	State Zip
Mailing Address if Different		Phone	Date of Birth
Email Address:			

### EDUCATION

High School	City, State
Did you Graduate? (y/n)	GED Certificate?

College Attended	City, State
Did you Graduate? (y/n)	Degree:

Other	City, State
Did you Graduate? (y/n)	Degree:

SPECIAL SKILLS, TRAINING, OR CERTIFICATIONS:

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# EMPLOYMENT HISTORY

**BEGIN WITH MOST RECENT EMPLOYER**

<b>From (Mo/Yr)</b>	<b>To (Mo/Yr)</b>	<b>Employer Name</b>
<b>Position Title</b>		<b>Employer Address</b>
<b>Duties</b>		
<b>Supervisor's Name &amp; Contact Info</b>		
<b>Reason for Leaving</b>		
<b>May we Contact your current employer (y/n)</b>		

<b>From (Mo/Yr)</b>	<b>To (Mo/Yr)</b>	<b>Employer Name</b>
<b>Position Title</b>		<b>Employer Address</b>
<b>Duties</b>		
<b>Supervisor's Name &amp; Contact Info</b>		
<b>Reason for Leaving</b>		
<b>May we Contact this employer (y/n)</b>		

<b>From (Mo/Yr)</b>	<b>To (Mo/Yr)</b>	<b>Employer Name</b>
<b>Position Title</b>		<b>Employer Address</b>
<b>Duties</b>		
<b>Supervisor's Name &amp; Contact Info</b>		
<b>Reason for Leaving</b>		
<b>May we Contact this employer (y/n)</b>		

<b>From (Mo/Yr)</b>	<b>To (Mo/Yr)</b>	<b>Employer Name</b>
<b>Position Title</b>		<b>Employer Address</b>
<b>Duties</b>		
<b>Supervisor's Name &amp; Contact Info</b>		
<b>Reason for Leaving</b>		
<b>May we Contact this employer (y/n)</b>		

## Military Service

<b>Branch of Service (if any)</b>	<b>From</b>	<b>To</b>
<b>Rank at Discharge</b>	<b>Type of Discharge</b>	
<b>Special Skills/Duties</b>		

## OTHER INFORMATION

Please list any scholarships, apprenticeships, licenses, certifications, memberships in professional organizations or other information you believe should be considered in evaluating your qualifications:

## SUPPLEMENTARY INFORMATION

<b>Type of Employment Desired:</b>	<b>Full Time</b>	<b>Part Time</b>	<b>Temporary</b>
<b>Are you now or have you ever been employed by the Village?</b>	<b>Yes</b>	<b>No</b>	
<b>If yes, what position?</b>			
<b>From: (Mo/Yr)</b>	<b>To: (Mo/Yr)</b>	<b>Reason for Leaving:</b>	
<b>List any relatives employed by or currently holding an appointed or elective position in the Village of Germantown:</b>			
<b>Do you have a valid Wisconsin Driver's License?</b>	<b>Yes</b>	<b>No</b>	
<b>Do you have a valid Wisconsin Commercial Driver's License?</b>	<b>Yes</b>	<b>No</b>	
<b>Have you ever been convicted of a felony?</b>	<b>Yes</b>	<b>No</b>	
<b>If yes, please explain:</b>			

## REFERENCES

<b>Name:</b>	
<b>Phone:</b>	<b>Email:</b>
<b>Position/Title/Profession</b>	<b>Relationship</b>
<b>Approximately how many years has this individual known you?</b>	

<b>Name:</b>	
<b>Phone:</b>	<b>Email:</b>
<b>Position/Title/Profession</b>	<b>Relationship</b>
<b>Approximately how many years has this individual known you?</b>	

<b>Name:</b>	
<b>Phone:</b>	<b>Email:</b>
<b>Position/Title/Profession</b>	<b>Relationship</b>
<b>Approximately how many years has this individual known you?</b>	

# APPLICANT CERTIFICATION

Applicant please read carefully and sign below:

All Information provided, and statements made by me as part of this application, or as part of any additional information provided in support of this application, are complete, correct and true to the best of my knowledge.

I understand that if I am selected for employment, false information provided, or false statements made as part of this applications may be considered as cause for dismissal.

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Optional: Under the provisions of Section 19.36, Wisconsin Statutes, I request that my identity as an applicant for employment not be revealed without my consent or until required by law.

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

VILLAGE OF GERMANTOWN  
N112 W17001 MEQUON ROAD  
GERMANTOWN, WI 53022  
Phone: (262) 250-4700 Fax: (262) 253-8255  
Employing Agency

**AUTHORIZATION FOR RELEASE OF INFORMATION**  
*(For official use only, not to be released to unauthorized persons)*

I hereby empower an employee of the **Village of Germantown** or other authorized representative thereof bearing this release to, within one year of its date; obtain information and records pertaining to me from any or all of the following sources:

1. Municipal, State or Federal law enforcement agencies
2. Selective Service System
3. Any banking institution
4. Any place of business (for purpose of obtaining credit or employment data)
5. Credit rating bureaus or institutions maintaining individual credit rating files
6. Any previous employer
7. Present employer
8. Any school, college, university or other educational institution
9. Any law enforcement or jail officer

**Exceptions to this blanket authorization**

1. Any medical information in the possession of any source named above until subsequent to a conditional offer of employment (per Americans with Disabilities Act).
2. \_\_\_\_\_
3. \_\_\_\_\_

This release is executed to authorize **The Village of Germantown**, as a prospective employer, to obtain the above information. It is understood that said information shall be used only in consideration of my employment and shall not be further disseminated for any purpose. If employment is denied due to information obtained on a credit report, I understand that I can receive this information by calling toll free (800) 888-4213.

\_\_\_\_\_  
Full Name (please print)

\_\_\_\_\_  
Date Signature (full name)

\_\_\_\_\_  
Address (Street and Number) City State Zip

\_\_\_\_\_  
E-Mail Address Position Applying For

Date of Birth: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Phone: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ SSN: \_\_\_\_\_

**WITNESS SIGNATURE:** \_\_\_\_\_