CITY OF KEWAUNEE APPLICATION FOR EMPLOYMENT

The City of Kewaunee is an equal opportunity employer and fully subscribes to the principles of Equal Employment Opportunity. It is the policy of this company to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal or state law. As an equal opportunity employer, the City of Kewaunee intends to comply fully with all federal and state laws and the information requested on this application will not be used for any purpose prohibited by law. Disabled applicants may request any needed accommodation.

(please print or type)							
POSITION APPLIED FOR:							
FULL TIME	PART-TIME	SEASONAL	TEMF	PORARY			
LAST NAME:	FIRST NAME:		MIDDLE INITIAL				
ADDRESS:	CITY:	STATE:	ZIP CODE:				
TELEPHONE: ()	DAY TELEPHONE	Ξ: ()	_EVENINGS (C	OPTIONAL)			
* If you are under 18 years required proof of your age		ovide	□ yes	□ no			
* Have you ever filed an ap of Kewaunee before?	plication with the C	ity	□ yes	□ no			
		lf Yes, gi∖	/e date				
* Have you ever been empl Kewaunee before?	loyed with the City o	of	□ yes	□ no			
		lf Yes, giv	e date				
* Are you currently employe	ed?		□ yes	□ no			
* May we contact your current employer?			□ yes	□ no			
* Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?			□ yes	□ no			
* On what date would you be available for work?							
* Have you been convicted (Conviction will not necessarily dis	□ yes	□ no					
If yes, please give detail.							

EDUCATION

	NAME AND LOCATION OF SCHOOL	NUMBER YEARS COMPLETED	DID YOU GRADUATE	COURSE OF STUDY	DEGREE/ CERTIFICATE
ELEMENTARY					
HIGH SCHOOL					
COLLEGE					
OTHER					
THIS POSITION	RENT LICENSES OR NAS DESCRIBED IN T ur qualifications for this	HE JOB DESCRIF	PTION: (You ma	ay include any otl	her that you feel are
LIST ANY SPEC WHICH YOU A	CIAL SKILLS OR QUAL RE APPLYING:	IFICATIONS WHI	CH YOU FEEL	ARE RELEVANT	
			~~~~~~~~~~		
	⁻ duties				

## **EMPLOYMENT HISTORY**

Please give accurate and complete information. Start with present or most recent employer. Attach an additional sheet if necessary. You may also include a resume.

TELEPHONE NO.				
EMPLOYED FROM / / TO / /				
HOURLY PAY: START LAST				
TELEPHONE NO				
EMPLOYED FROM / / TO / /				
HOURLY PAY: START LAST				
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
TELEPHONE NO.				
EMPLOYED FROM _/ / TO _/ /				
HOURLY PAY: START LAST				

CERTIFICATION & SIGNATURE

Please read the following statements carefully before you sign your name or initial where indicated.

"I HEREBY CERTIFY that the answers given by me to the above questions and statements are true and correct and hereby authorize you to contact references (if references are requested any time in the hiring process), past or present employers, persons, schools, law enforcement agencies and any other sources of information which may be relevant to my application for employment. It is understood and agreed that any misrepresentation, false statement or omissions by me in this Application will be sufficient reason for rejection of my application or for dismissal at any time during my employment, without liability to the City of Kewaunee. I have read, understood and agree to the above statement. **PLEASE INITIAL HERE**

I further understand that no representative of the City of Kewaunee has the authority to enter into any agreement for employment for any specified period of time and that the City of Kewaunee is not guaranteeing employment for anyone. No employment contract is created by virtue of my being hired by the City of Kewaunee. I have read, understand and agree to the above statement. **PLEASE INITIAL HERE**

If employed, I agree to abide by all of the work and safety rules of the City of Kewaunee. I understand that the City of Kewaunee is committed to maintaining a drug-free workplace. I am aware that the City of Kewaunee may require a drug test as a part of the hiring process. Also, if employed, I realize that the City of Kewaunee conducts drug and alcohol testing of its employees in accordance with set policies and procedures. I have read, understand and agree to the above statement. **PLEASE INITIAL HERE**

SIGN HERE	DATE

SAVE APPLICATION PRINT APPLICATION EMAIL APPLICATION