## TOWN OF ST. GERMAIN EMPLOYMENT / JOB APPLICATION

## PERSONAL INFORMATION

FULL NAME:		DATE	
First	Middle	Last	
ADDRESS:		Apt/	Suite
		, 190.	
City	State	Zip (	Code
E-MAIL:		PHONE:	
SOCIAL SECURITY NUM	BER (SSN):		
DATE AVAILABLE:		_ DESIRED PAY: \$	
POSITION APPLIED FOR	:		
EMPLOYMENT DESIRED		ART-TIME 🗆 SEASONAL	
	EMPLOYM	ENT ELIGIBILITY	
ARE YOU LEGALLY ELIC	BLE TO WORK	IN THE U.S?  Ves  No*	
HAVE YOU EVER WORK	ED FOR THIS EM	IPLOYER?  YES*  NO	
*IF YES, WRITE THE STA	RT AND END DA	ATES:	
HAVE YOU EVER BEEN		A FELONY?  YES*  NO	
*IF YES, PLEASE EXPLA	N:		
r			
	ED	UCATION	
FROM:			
GRADUATE?  VES  NO			
COLLEGE:			
FROM:	TO:		
GRADUATE?  Set yes  NO	DEGREE:	· · · · · · · · · · · · · · · · · · ·	
Job application- Town of St. (	Germain, WI.		Dese

OTHER:	CITY / STATE:	
FROM:	TO:	
DEGREE/CERTIFICATION:		
OTHER:	CITY / STATE:	
FROM:	TO:	
DEGREE/CERTIFICATION:		

## PREVIOUS EMPLOYMENT

EMPLOYER 1:				
Company / Individu	al			
E-MAIL:	PHONE:			
ADDRESS:				
Street Address		Apt/Suite		
City	State	Zip Code		
STARTING PAY: \$	□ HOUR □ SALARY ENDING PAY: \$_			
JOB TITLE:	_ RESPONSIBILITIES:			
FROM:	TO:			
REASON FOR LEAVING:				
EMPLOYER 2: Company / Individu	al			
Company / Individu	a			
E-MAIL:	PHONE:			
ADDRESS:				
Street Address		Apt/Suite		
City	State	Zip Code		
		•		
STARTING PAY: \$	_ □ HOUR □ SALARY ENDING PAY: \$_			
JOB TITLE:	_ RESPONSIBILITIES:			
FROM:	TO:			
REASON FOR LEAVING:				

## REFERENCES

FULL NAME:			RELATIONSHIP:	
	First	Last	TITLE:	
E-MAIL:		F	PHONE:	
	First	Last	RELATIONSHIP:	
COMPANY: _			TITLE:	
E-MAIL:		F	PHONE:	
DISCLAIMER				

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME