City of Waterloo, Wisconsin Application for Employment We Are an Equal Opportunity Employer

NOTICE: Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable). Applications which are incomplete or illegible will not be considered. If space provided is insufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions.

	1.	PERSONAL II	NFORMATION			
ame in Full (Last, First, Middle)				Social Security Number		
address (Apartment, Street, P.O. Box)				Home Telephone Number		
				()		
City		State Zip Code		Work Telephone Number		
				()		
e you over the age of 18? 🗌 Yes 📋	No	Are	you a United States cit	izen? 🗌 Yes 🗌 No		
you have a valid Wisconsin driver's lic	ense? 🗌 Yes	☐ No Doy	ou have a valid driver'	s license from another state? 🔲 Yes 🔲 No		
ave you ever been convicted of a felony? yes, please attach a separate sheet givir		n.				
		2. EDUC	ATION			
me of School Location	Dat From	tes To	Course Pursued	Degree, Diploma, or Credits Earne		
gh Schools						
bliege						
nege						
raduate School						
	<u> </u>					
ist any scholarships, apprenticeships, li hould be considered in evaluating your c	censes, certifica jualifications.	itions, membe	ership in professional	organizations or other information you beli		
		new value				
POSITION APPLIED FOR:			DATE OF A			

3. EMPLOYMENT

Begin with current or most recent employer. List chronologically all employment, including summer and part-time employment while attending school. All time must be accounted for. If unemployed for a period, provide dates. To furnish additional employment information, attach sheets of the same size and format as this application.

Name and Address of Employer	Dates	Position and Kind of Work
	From To	
Name		
Street		
City, State	Full-Time	
Supervisor's Name/Telephone:	Part-Time	
	Ture-time [Reason for Leaving
May we contact the employer/supervisor? ☐ Yes ☐ No	Annual Salary/Wages:	reason to Louving
Nama	From To	
Name		
StreetCity, State	Full-Time	
Supervisor's Name/Telephone:	run-runc 🗖	
Supervisor s warner rereptione.	Part-Time	
	Annual	Reason for Leaving
May we contact the employer/supervisor? ☐ Yes ☐ No	Salary/Wages:	
Name	From To	
Street		
City, State	Full-Time	
Supervisor's Name/Telephone:	Part-Time □	
	rait-inne	Reason for Leaving
May we contact the employer/supervisor? ☐ Yes ☐ No	Annual Salary/Wages:	Reason for Leaving
	out	
	From To	
Name		
Street	Eull Time	
City, State	Full-Time	
Supervisor's Name/Telephone:	Part-Time	
	Annual	Reason for Leaving
May we contact the employer/supervisor? ☐ Yes ☐ No	Salary/Wages:	

Branch of Service Month/Year Served From To List special schools attended/skills acquired during military service. 5. REFERENCE Give three references (not relatives, or present employer; avoid listing member Name Address City/State/Zip Telephone Number (100)		Skill Specialty or Primary Duty
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City/State/Zip		Number of Years Acquainted
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Telephone Number ()		Position/Title/Profession
Name		Number of Years Acquainted
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Name		Number of Years Acquainted
Address		_
City/State/Zip		Position/Title/Profession
Telephone Number ()		rosition/ritte/Floression
6. GENERAL		

COMPLETE IF INSTRUCTED TO DO SO BY EMPLOYING AGENCY.

For questions A-C, attach no more than one additional page for each answer.

- A. Why have you chosen to apply for this position?
- B. Discuss things you have done which have contributed to your life experience. Remember to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.
- C. Why do you believe you could relate to and/or work with people of different races, sexes, cultures, ages, socio-economic groups, and educational levels?

APPLICANT	DIEVEE	DEADC	ADECILIA	AND SIG	NIBELOW
APPLICANT	PLEASE	KEAU C	AREFULLT	ANID SIG	IN REFOAM

Information provided and statements made as part of this application may be grounds for not employing you or for dismissing you after you begin work. All information provided and statements made are subject to verification.

CERTIFICATION

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 EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

Applicant's signature:	Date signed:	



136 North Monroe Street Waterloo, WI 53594 Phone: (920) 478-3025 Fax: (920) 478-2021

www.waterloowi.us

Privacy Act Statement Ethnicity and race information is requested under the authority of 42 U.S.C. Section 2000e-16 and in compliance with the Office of Management and Budget's 1997 Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity.

Specific Instructions: The two questions below are designed to identify your ethnicity and race. **Regardless of your answer to question 1, go to question 2.**

Question 1. Are You Hispanic or Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

Yes

No

Question 2. Please select the racial category or categories with which you most closely identify by placing an "X" in the appropriate box. Check as many as apply.

RACIAL CATEGORY (Check as many as apply)

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White