## TOWN OF HOLLAND APPLICATION FOR EMPLOYMENT

MAILING ADDRESS TOWN OF HOLLAND W7937 CO RD MH HOLMEN WI 54636

The Town considers all applicants without regard to race, color, religion, creed, gender, natural origin, age, disability, marital or veteran status, or any other legally protected status.

Date of Application			Position(s) Applied For				
Name							
Last		First		Middle			
AddressNumber	Street	City	Sta	tate	Zip Code		
			Driver's I	License # _			
If you are under 18 years of age, a work permit is required.							
	-	•					
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How Did You Learn Abo Employment Agency	ut Us? Advertisement _ Other		Friend/Relative				
Have you ever been employed here before? If yes, give date							
Are you currently employed? May we contact you present employer?							
Date available for work What is your desired salary range?							
Are you able to work: Full Time Part Time Temporary							
Are you currently on "lay-off" status and subject to recall? Do you have a CDL License?							
Other Certifications (Attach photocopy of certifications: Lifeguard Training, WSI, First Aid, CPR, etc.)							
A. Have you ever pleaded guilty to or been convicted of a misdemeanor or felony?  B. Do you have any pending criminal charges?  If yes to either A. or B. above, please explain. Include date(s), location of court, nature and place of charge or conviction and disposition of the case. (Conviction will not necessarily disqualify an applicant from employment.)							
EDUCATION							
			se of Yea		=		
School High School	Name/City/State	Study	y Coi	mpleted	Degree		
Undergraduate College							
Graduate/Professional							
Other (Specify)							
PERSONAL/PROFESSIONAL REFERENCES (Do not include family members)							
Name	Telephone Nu		Best Time to Call		·		
1.			The same of same				
2.							
3.							

## WORK EXPERIENCE

Start with your present or last job. Include any job-related military experience and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, natural origin, disabilities or other protected status.

Employer	Telephone Number	
Address	Dates Employed (From /To)	
Job Title	Supervisor	
Hourly Rate/Salary	Work Performed	
Reason For Leaving	May we contact?	
Employer	Telephone Number	
Address	Dates Employed (From /To)	
Job Title	Supervisor	
Hourly Rate/Salary	Work Performed	
Reason For Leaving	May we contact?	
Employer	Telephone Number	
Address	Dates Employed (From /To)	
Job Title	Supervisor	
Hourly Rate/Salary	Work Performed	
Reason For Leaving		
Reason For Leaving	May we contact?	
List any experience or training that would qua	lify you for a position with the Town of Holland.	
Note to Applicants: DO NOT ANSWER TI	HIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT	THE
REQUIREMENTS ( Are you capable of performing in a reasonable involved in the job or occupation for which you	OF THE JOB FOR WHICH YOU ARE APPLYING.  The manner, with or without a reasonable accommodation, the activities on have applied? I have received and read the job description and under No	rstand
I certify that answers given herein are true and application for employment. In the event of e	I correct and authorize investigation of all statements contained in this mployment, I understand that false and misleading information given in arge. I understand, also that I am required to abide by all rules and	
Signature of Applicant	 Date	