

VILLAGE OF SHOREWOOD

APPLICATION FOR EMPLOYMENT

3930 N. Murray Avenue
Shorewood, Wisconsin 53211



Instructions for Applicant:

1. Type responses or print responses in blue or black ink.
2. Please respond to all questions. Credit may not be given for incomplete information.
3. Date and sign where required.

Title of Position Applying For: _____ **Date:** _____

APPLICANT INFORMATION

Last Name First Name Middle I. Any other names by which you have
been known on official records.

Address Number and Street City and State Zip

Contact Phone Number Alternate Phone Number

Email Address Social Security Number

GENERAL INFORMATION

Are you 18 years of age or older? Yes No

Are you eligible to work in the United States? Yes No

Have you ever applied for employment with the Village of Shorewood? Yes No

If so, what position(s): _____

Have you ever been employed with the Village of Shorewood? Yes No

If so, what position(s): _____

Are any of your relatives presently employed with the Village of Shorewood? Yes No

If so, please provide name and relationship: _____

Do you have a valid driver's license? Yes No

Do you have a Class B CDL (only answer if position applying for requires it)? Yes No

GENERAL INFORMATION (continued...)

Have you been convicted of a crime other than minor traffic violations? Yes No

If yes, please list below the charge and date of conviction. Feel free to provide additional explanation if needed. Convictions are not an automatic bar to employment but are reviewed in relation to the job applied for. Convictions not reported may be cause for discharge. Your conviction record will be forwarded to the Shorewood Police Department.

Charge(s)	Date	Additional Explanation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are any criminal charges or proceedings pending against you? Yes No

Have you ever been discharged from any employment or asked to resign? Yes No

If yes, please explain: _____

Are you currently employed? Yes No

If yes, may we contact your present employer for references? Yes No

Type of employment you desire: Full-time Part-time Temporary Seasonal

What is the first date you would be available to start: _____

If awarded the job, what is the hourly wage that you desire? _____

How did you hear about this position (check all that apply)?

____ Village of Shorewood website ____ Neighbor / Friend / Family / Colleague

____ League of Wisconsin Municipalities website ____ Civic Info Kiosk in the Village Center

____ Village of Shorewood Manager's Memo ____ Village of Shorewood Facebook page

____ Online Job Posting Website – If yes, which website: _____

____ Association or Organization page – If yes, which website: _____

EDUCATION AND TRAINING

High School

Name of School	Graduation Date	Years Attended	GPA
Graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Address	City/State		
Have you passed a high school equivalency or G.E.D. test: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			

College/University

Name of School	Graduation Date	Years Attended	GPA
Graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Address	City/State		
Degree	Major(s)	Minor(s)	

College/University

Name of School	Graduation Date	Years Attended	GPA
Graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Address	City/State		
Degree	Major(s)	Minor(s)	

Have you had any job-related training in the United States Military? Yes No

If so, please describe: _____

Please include any specialized training, apprenticeships, certifications, licenses or other skills you possess that relate to the position that you are applying for:

EMPLOYMENT HISTORY

Please begin with present or most recent employment and work backward. Account for all time during the past ten years, including periods of unemployment. In addition, list any other paid or unpaid work experience that may qualify for a position. Attach additional page(s) if necessary.

Employer #1

Name of Employer Date Started _____ to _____
Date Resigned/Completed

Address City/State _____ Phone Number _____

Most recent position held Starting Salary _____ Ending Salary _____

Duties include: _____

Supervisor's Name Supervisor's Position _____ Supervisor's Phone Number _____

Reason for leaving: _____

May we contact employer for reference? Yes No # of hours worked per week? _____

Employer #2

Name of Employer Date Started _____ to _____
Date Resigned/Completed

Address City/State _____ Phone Number _____

Most recent position held Starting Salary _____ Ending Salary _____

Duties include: _____

Supervisor's Name Supervisor's Position _____ Supervisor's Phone Number _____

Reason for leaving: _____

May we contact employer for reference? Yes No # of hours worked per week? _____

EMPLOYMENT HISTORY (continued...)

Employer #3

_____ to _____
Name of Employer Date Started Date Resigned/Completed

Address City/State Phone Number

Most recent position held Starting Salary Ending Salary

Duties include: _____

Supervisor's Name Supervisor's Position Supervisor's Phone Number

Reason for leaving: _____

May we contact employer for reference? Yes No # of hours worked per week? _____

NOTIFICATION AND AGREEMENT

I hereby certify all information provided by me in this application or any other accompanying documents is true and complete to the best of my knowledge. I understand the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery. I agree the Village of Shorewood shall not be held liable in any respect if I am denied employment or my employment is terminated due to false statements or omissions made by me on this application or any other document. It is the policy of the Village of Shorewood to afford equal opportunity to all employees and applicants for employment as protected by the Federal, State or Local law.

I understand that submission of an application does not guarantee employment. I further understand should an offer of employment be extended by the Village of Shorewood that such employment with the Village of Shorewood is At Will, for no specified duration and may be terminated by either the Village of Shorewood or myself at any time, with or without cause or notice prior to employment. I understand that none of the documents, policies, procedures, actions or statements of the Village of Shorewood or its representatives used during the employment process is deemed a contract of employment. I understand that no representatives of the Village of Shorewood, except the Village Manager, has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreement must be made in writing and signed by the Village Manager of the Village of Shorewood.

I understand that, if offered a position with the Village of Shorewood, I may be required to submit to a pre-employment medical examination, drug screening, and/or background check as a condition of employment. I understand unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed. I fully release and discharge, absolve, indemnify, and hold harmless all parties involved from any and all claims, liability, demands, causes of action, damages or costs including attorney fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release except for the malicious and willful disclosure of derogatory fact concerning my employment made for the express purpose of preventing me from obtaining employment which the party disclosing such facts knows are untrue.

I acknowledge that, in the event I am a finalist for the position to which I am applying, my application may be matter of public record, pursuant to Wisconsin's Open Records Law (Wisconsin Stat. § 19.36) and may be subject to disclosure. I acknowledge that I have read and understood the above statements and hereby grant permission to confirm the information supplied by me on this application and any other accompanying or required documents.

Applicant Signature: _____ Date: _____

VILLAGE OF SHOREWOOD

CRIMINAL BACKGROUND CHECK – AUTHORIZATION TO RELEASE INFORMATION

Read the authorization for release of information form below. Your completion of this document allows the Shorewood Police Department to investigate your background and gives your permission for the release of information from the sources listed herein. After affixing your signature to the release form you must print your name beneath your signature.

To whom it may concern:

I request and authorize you to provide to the Village of Shorewood and/or any representative thereof any and all information that you may have concerning the following:

1. Employment history, including without limitation all disciplinary records, performance evaluations, sick leave records, and any other matters contained in my personnel file;
2. Scholastic records;
3. All medical records in your possession and/or control, including records of physical or mental examination;
4. Financial and credit information;
5. Records maintained by any law enforcement agency, including but not limited to records of arrest and/or conviction, juvenile records, or those relating to traffic violations.
6. Residential history including information from past and present landlords and/or mortgage/property management company records.

This information is to be used to assist the Village of Shorewood in determining my qualifications and fitness for the position I am seeking. Please provide to the Village and/or any representative thereof, any information falling within the categories of records listed above, including any information which would otherwise be considered confidential or privileged, and permit the Village to make copies of that information.

Pursuant to Section 103.13 of the Wisconsin State Statutes, demand is hereby made that you provide access, and, upon request, copies of all relevant records in your possession to the bearer of this waiver.

I hereby release, and hold harmless, on behalf of myself, my heirs, assigns and successors interest forever, both you and/or your employer or organization from any liability or damage whatsoever which may result because of your responses to this request for information. Further, I covenant not to sue you or your employer or organization for any information which is released in response to this request. In making these statements, I understand that information which you give may result in my not being employed

A photocopy reproduction of this request shall be for all intents and purposes as valid as the original. This release remains effective until you receive signed written instructions to the contrary. You may retain this form in your files.

Print Name (Last, First, Middle): _____ Date of Birth: _____

Social Security Number: _____ Driver License #: _____ State: _____

Address: _____ City/State: _____ Zip: _____

Applicant Signature: _____ Date: _____