

## APPLICATION FOR EMPLOYMENT CITY OF PLATTEVILLE

www.platteville.org

Thank you for applying for employment with the City of Platteville.

Complete the entire application, including signature and date, to ensure consideration. A resume may be attached but is a not a replacement for the information requested in the application. The City of Platteville does not discriminate based on race, color, religion, national origin, creed, age, marital status, sex, sexual orientation or disability. Applicants are not required to reveal any information that may identify these attributes. Completed applications should be submitted to City of Platteville, Job Application, P.O. Box 780, Platteville, WI 53818 or electronically to <a href="mailto:steffenc@platteville.org">steffenc@platteville.org</a>.

POSITION INFORMATION															
Position you a applying for:	re								Date						
☐ Full Time ☐ Part Time ☐ Seasonal Hours ☐ Limited Term/Temporary															
How did you le	earn of t	this Position?													
Newspaper Employee															
COMPLETE SECTION BELOW ONLY IF APPLING FOR PARKS & RECREATION															
Please indicate your preference for each position you are interested in by marking 1, 2, 3, ect. Next to positions below, with 1 being first choice.															
RECREATION POSIITIONS: AQUATICS POSITIONS:															
Recreation Attendant (check below) Dance: Ballet & Beyond Introduction to Sports Soccer (Pre-K) T-Ball Tennis Special Populations Coach Youth Camps Volleyball Scorekeeper Softball Umpire Soccer Referee Soccer Coach (Volunteer)						Pool Manager Assistant Pool Manger Swim Team Coach Assistant Swim Team Coach Lifeguard					<ul> <li>Water Safety Instructor (check below)</li> <li>□ Parent/Child</li> <li>□ Level 1 - 3</li> <li>□ Level 4 - 6</li> <li>□ Adult</li> <li>□ Adaptive</li> <li>□ Pool Attendant</li> </ul>				
Please indicate when you are available to be scheduled (check AM or PM). Due to the nature of our business, the more available you are the more opportunities we can consider you for.															
Saturday		Sunday	Tue	sday	lay Wednesday			TH	Thursday		Friday				
From AM / F	PM 🗆	AM / PM				/ PM	PM AM / PM			□AM / PM□			□AM / PM□		
то ПАМ / Б	PM 🗆	AM / PM				/ PM	/ PM AM / PM			□А	□AM / PM□		$\square$ AM / PM $\square$		
APPLICANT	ΓINFO	RMATION													
Last Name					First								M.I.		
Street Address	S										Aparti	ment/Un	it #		
City									State		ZIP				
Phone					E-ma	il Add	ress				·				
Date Available Desired Sa					у		·			Comments	Comments				
Are you a citiz	en of the	e United States	5?	YES	NO [		If no, are you authorized to work in the U.S.?						NO 🗆		
Have you ever worked for the City of Platteville? YES NO If so, when?															

APPLICANT INFORMATION (CONTINUED)																
Have you ever	ou ever been convicted of a felony?						NO 🗆	If y	es, exp	lain						
	Are you related to any current City of Platteville employee or elected official?							If s	o, who	?						
Have you ever been convicted of a misdemeanor crime of domestic violence?							NO 🗆	If y	es, exp	lain?						
Are you prohibited by state or federal law from							NO 🗆	If y	f yes, explain?							
Do you possess a valid Wisconsin driver's license or							NO 🗆	If s	o, whic	h state?						
EDUCATIO	N															
High School	T						Address									
Did you gradu	iate?		YE	s 🗆	NO [	If no	, have you pa	assed	a high	school Equiv	alency or GED test?	YES	NO 🗆			
College							Address									
From		То			Did you graduate?	YES	NO		Degree							
College		gradua				3	Address									
From		То			Did you graduate?	YES NO			Degree							
Other						ı	Address									
From			То			Did you graduate?	YES	NO		Degree						
Complete N	NEX	T THRE	E QUE	STIONS	if app	lying for P	OLICE OFF	ICEF	R POS	ITION	,					
Have you successfully completed the basic training required for certification (i.e. law enforcement academy)?					YES	NO		Where?								
If yes, what ty you successfu				ng have	☐ Law	Enforcement		Jai	I	☐ Secure	Juvenile Detention					
Were you employed as a law enforcement officer prior to February 1, 1993  YES □			NO 🗆					n Wisconsin Administrative Code § LES 2.01(1)€, pertains to law cers first employed on or after February 1, 1993.)								
REFERENC	ES															
Please list thre		ofession	al refero	ences.												
Full Name									Title							
Organization								Phone								
Relationship																
Full Name									Title							
Organization								Phone	9							
Relationship																
Full Name									Title							
Organization									Phone	e						
Relationship																

MILITARY SE	RVIC	E												
Branch										From		То		
Rank at Discharg	je						Type of Discha	rge						
If other than honorable, explain														
DDEVIOUS EN	ADI O	VMENT	/DI FAC	T LICT MOC	F DECEME FIRST)									
	4PLO	IMENI	(PLEAS	E LIST MUS	FRECENT FIRST)									
Employer								Phone						
Address								isor			ı			
Job Title						Star	ting Salary	\$		Ending Sal	ding Salary \$			
Responsibilities														
From					Reason for Leaving									
May we contact y	your pr	evious su	upervisor	for a reference	e?	YES	S 🗆	NO 🗆						
Employer								Phone						
Address								Superv	isor					
Job Title						Star	ting Salary	\$		Ending Sal	Salary \$			
Responsibilities														
From			То		Reason for Leaving									
May we contact y	your pr	evious su	upervisor	for a reference	e?	YES \( \square\) NO \( \square\)								
Employer							Phone							
Address						Supervisor			visor					
Job Title						Starting Salary \$			Ending Sal	ary	\$			
Responsibilities														
From		То			Reason for Leaving									
May we contact y	your pr	evious su	upervisor	for a referenc	re?	,	YES	NO 🗆						
Employer								Phone						
Address								Superv	visor					
Job Title						Sta	arting Salary	lary \$		Ending Sal	ary	\$		
Responsibilities														

PREVIOUS EMPLOYMENT CONT.												
From		То		Reason for Leaving								
May we contact you	ur previous supe	ervisor	for a reference?	•	YES	NO 🗆						
SPECIAL SKILL												
Describe any special skills applicable to this position:												
Describe any additional training and experience applicable to this position:												
DISCLAIMER A												
<ul> <li>I certify that the information provided in this application (and accompanying resume, if any) is true, correct and complete to the best of my knowledge without omissions of any kind. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.</li> </ul>												
I authorize persons, schools, my current employer (if applicable) and previous employers and organizations named in this application (and accompanying resume, if any) to provide any relevant information to the City of Platteville that may be required to enable the City of Platteville to arrive at an employment decision.												
	the City of Platto of Platteville's hir			of information from	any liability as a re	esult of furnishing	and receiving	g any inforr	mation related to			
	ient. I agree tha			to a pre-employmen examinations and sci								
• I underst	and that all appo	ointme	nts are probatio	onary for a period du	ıring which I must o	demonstrate my fi	tness for con	tinued emp	oloyment.			
	understand that ss evaluation.	any a	opointment or jo	ob offer tendered to	me will be continge	ent upon the resul	ts of addition	al testing,	a complete check			
				vill be considered act or not applications a		ys. If I still want t	to be conside	red for em	oloyment			
of an "at		ich me		less otherwise define 'at will" employee, I								
• I underst	and that if hired	l, I am	required to abid	de by all rules and re	egulations of the Cit	y of Platteville.						
Signature:								Date:				
			F!	Name to the state of the state								
			Electronic S	Signature Accepted (	only available in Int	ternet Explorer)						
OPTIONAL: CO	NFIDENTIAL	ITY										
Under Wisconsin State Statutes, the names of applicants must be revealed unless a request for confidentiality is received from the applicant. If you wish to keep your name confidential to the extent allowed by the Wisconsin Statues, you need to sign the request below. Please understand that should you become a finalist for employment and a request is made, Wisconsin Statutes require us to release your name.												
I request that my e they would tend to			and all related	references and docu	uments remain conf	idential to the ext	ent allowed b	y Wisconsi	n Statutes since			
Signature of Applica	ant:				Date: _							