

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. 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 Platteville Public Library, Attn: Jessie Lee-Jones, 225 W Main St | Platteville, WI 53818 or electronically to director@plattevillepubliclibrary.org.

POSITION INFORMATION										
Position you are applying for:	Date									
Full Time Seasonal Hours Limited Term/Temporary										
How did you learn of this Position?										
Newspaper Employee Walk-In City Website] Other									

COMPLETE AVAILABILTY SECTION BELOW

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	Monday	Tuesday	Wednesday	Thursday	Friday
From	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM
То	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM	AM / PM

APPLICANT INFORMATION											
Last Name				First					M.I.		
Street Address						Apar	irtment/	Unit #			
City						Sta	Ρ				
Phone			E-mail Addr	ess			<u>, </u>				
Date Available			Desired Salary					Comments			
Are you a citizen of the United States?			YES	NO 🗌	If no, are y	ou authc	orized to	o work in the U.S	5.?	YES 🗌	NO
Have you ever w	orked for	the City of Platteville?	YES	NO 🗌	If so, when	?					
Have you ever be	een convi	cted of a felony?	YES	NO 🗌	lf yes, expla	ain					
Are you related t employee or electronic		rrent City of Platteville ial?	YES	NO 🗌	If so, who?						
Have you ever be domestic violence		cted of a misdemeanor crime of	YES	NO 🗌	If yes, explain?						
Are you prohibit possessing a fire		te or federal law from	YES	NO 🗌	If yes, explain?						
Do you possess a valid driver's lice	sconsin driver's license or a another state?	YES	NO 🗌	If so, which	n state?						

PREVIOUS EMPLOYMENT (PLEASE LIST MOST RECENT FIRST)											
Employer									hone		
Address								Sı	upervisor		
Job Title						Sta	arting Salary	\$		Ending Salary	\$
Responsibilities											
From			То		Reason for Leaving						
May we contact you	us superv	visor for	a reference?		YE	ES 🗌	N	0			
Employer								Pł	hone		
Address								Sı	upervisor		
Job Title							arting Salary	\$		Ending Salary	\$
Responsibilities											
From		To Reason for Leaving									
May we contact you	r previou	us superv	visor for	a reference?		YE	ES 🗌	N	0		
Employer									Phone		
Address									Supervisor		
Job Title						St	tarting Salary		\$	Ending Salary	\$
Responsibilities											
From			То		Reason for Leavin	g					
May we contact you	ır previoı	us superv	visor for	a reference?			YES				
SPECIAL SKILLS OF		IFICATIO	ONS								
Describe any special	skills ap	plicable	to this p	osition:							
Describe any additio	nal train	ing and a	experier	nce applicable to	this position:						

EDUCATION	EDUCATION																
High School								Address									
Did you graduate?			YES		NO 🗌]	If no, ł	have you passed a high school Equivalency or GED test? YES 🗌 NO									
College		/ /						Address									
From		To Did you graduate?			YES	NO [Degree									
College							Address			1	1						
From	_	To Did you graduate?			YES	NO Degree											
Other					Address			1	1								
From		То		Did you gradua	ı te?	YES	NO [NO Degree									
MILITARY SERVICE																	
Branch											From			То			
Rank at Discharge	arge								Type of Discharge								
If other than hono	rable, ex	kplain															
DEFERENCES																	
REFERENCES Please list three pro	ofession	al refere	ancas														
	ojession	unejere		-													
Full Name										Title							
Organization									Phone								
Relationship																	
Full Name									Title								
Organization								Phone									
Relationship																	
Full Name									Title								
Organization									Phone								
Relationship												1					

DISCLAIMER AND SIGNATURE

- 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.
- 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.
- I release the City of Platteville and all providers of information from any liability and a result of furnishing and receiving any information related to the City of Platteville's hiring process.
- I understand that I may be required to submit to a pre-employment physical examination, including substance abuse screening, prior to appointment. I agree that the results of such examinations and screening may be released to the City of Platteville only for the consideration of my employment.
- I understand that all appointments are probationary for a period during which I must demonstrate my fitness for continued employment.
- I further understand that any appointment or job offer tendered to me will be contingent upon the results of additional testing, a complete check and fitness evaluation.
- I understand this application for employment will be considered active for up to 45 days. If I still want to be considered for employment thereafter, I will need to inquire as to whether or not applications are being accepted.
- I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City of Platteville is of an "at will" nature, which means that as an "at will" employee, I may resign at any time and that the City of Platteville may discharge me at any time with, or without cause.
- I understand that if hired, I am required to abide by all rules and regulations of the City of Platteville.

Signature:		Date:		
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Electronic Signature Accepted (only available in Internet Explorer)

OPTIONAL: CONFIDENTIALITY

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 employment application and all related references and documents remain confidential to the extent allowed by Wisconsin Statutes since they would tend to reveal my identity.

Signature of Applicant: _

Date: