

Submit your completed application to: Town of Rome 1156 Alpine Drive Nekoosa, WI 54457

For offic	e use	only	

Employment Application

Position Desir	red (A separate applic	ation is required for each p	ositio	n)					
Position Applied	for:								
Applicant Info	ormation								
Full Name: Las	t	First				M.I.	Date:		
Street Address: _							Apt. No.:		
City:						State/	Zip:		
Phone:			_ E	lmail					
Date Available:		Social Security No (Voluntary				De	sired Salary: \$		
Do you currently valid WI Driver's		License Number:				1	Exp. Date:	Class	: <u> </u>
Are you a citizen	of the United States?	YES NO		If	f no, are	you authorized	d to work in the U.	YES S.?	NO
Have you ever wo	orked for the Town o	YES NO TROME?		If yes	, when?				
accommodation?		unctions of the job for vich you cannot perform	_	ou are	applyin	g, either with (or without	YES	NO
	oe necessary for eligible a	ployment and Housing Act (pplicants/employees to perf							
High School:		Add	ress:_						
From:	To:	Did you gradı	ıate?	YES	NO	GED or Equivalent?_			
College:		Add	ress:_						
From:	To:	Did you gradı	uate?	YES	NO	Degree:_			
Other:		Add	ress:_						
From:	To:	Did you gradu	ıate?	YES	NO	Degree:_			

Name of Applicant:	Position Applied for:	
Certificates, Licenses & Skills (Attach	additional pages if needed)	
Name of License(s) and Certificate Number	- S	tate Expiration Date
Software Applications:		Typing WPM:
List any award(s), publication(s), qualification	ions for the position, etc. which are not listed in	another area of the application.
Experience List your most recent experience first and account for List each change in title or promotion separately. Att substitute for completing this section of the appl	or all experience during the last 10 years including U.S. I tach additional pages if needed. You may attach your res lication.	Military Service and/or any volunteer experience. sume or job-related certificates. A resume is not a
Employer:		Phone:
Address:		Supervisor:
Job Title:	Hours per week:	Salary:\$
From: To: Duties Performed:	Reason for Leaving:	
	YES NO	
May we contact your previous supervisor fo	or a reference?	Phone:
Employer:		Phone:
Address:		Supervisor:
Job Title:	Hours per week:	Salary:\$
From: To: To:	Reason for Leaving:	
May we contact your previous supervisor fo	YES NO or a reference? □ □	Phone:

Name of Applicant:	Position Applied for:	
4.11		Phone:Supervisor:
Job Title:		
From: To: Duties Performed:	Reason for Leaving	:
May we contact your previous supervisor for a	YES NO	Phone:
Adduses		Phone:Supervisor:
Job Title:		
From: To: Duties Performed:	Reason for Leaving	:
May we contact your previous supervisor for a	YES NO	Phone:
Employer: Address:		Phone:Supervisor:
Job Title:	Hours per week:	
	Reason for Leaving	
May we contact your previous supervisor for a	YES NO reference?	Phone:

Name of Applicant:	Position Applied for:	
	ced to resign or rejected during probation from employment he employer, dates of employment and reasons below.	YES NO
Conviction		
whether or not a court imposed a sentence. You r old. Please list all convictions since age 18, excludor eradicated. Convictions do not automatically d	demeanor? A "conviction" is any plea, verdict or finding of gumay exclude any conviction for marijuana-related offenses, in ding minor traffic violations and convictions that have been satisfied by January and the offense, the date of the offense to the position sought may be considered. If not, all new hires.	f over two years sealed, expunged se, the
Agreement		
correct to the best of my knowledge and understan	nts in this application and accompanying materials are true, c nd that misrepresentation or deliberate omission of fact may s rinted, to sign an oath of office and to furnish proof of educatio quired as a condition of employment.	ubject me to
Signature:	Date:	
Recruitment Questionnaire		
I first learned about this employment opport	tunity through:	
A Town amployee:		
Town's website		
Friend or relative		
☐ Internet Job site (specify website):_		
☐ Job Fair (specify which job fair and t	the location):	
☐ Print advertisement (specify newsp	paper or magazine):	
A publicly posted brochure (specify	where posted):	
Other (specify):		

Please respond to the following questions and submit this form with your application packet. The completed form is confidential and will be detached from your application. This information is voluntary and gathered in accordance with State and Federal laws. Check one: Female Male Check one: American Indian or Alaskan Native – All persons having origins in any of the original peoples of North or South America (including Central America) and who maintain cultural identification through tribal affiliation or community recognition. Asian or Pacific Islander – All persons having origins in any of the original peoples of the Far East, Southeast Asia, and Indian subcontinent or the Pacific Islands (excluding the Philippine Islands). These areas include Cambodia, China, Hawaii, Guam, India, Japan, Korea, Malaysia, Pakistan, Samoa, Thailand and Vietnam. Black – When not of Hispanic origin, all persons having origins in any of the black racial groups of Africa. Filipino – All persons having origins in any of the peoples of the Philippine Islands. Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American or Spanish culture

White – When not of Hispanic origin, all persons having origins in any of the peoples of Europe, the

Other (please specify):

or origin, regardless of race.

Middle East or North Africa.

Employment Questionnaire

TOWN OF ROME

Authorization for release of Information (For official use only, not to be released to unauthorized persons)

I hereby empower an employee of the Town of Rome, Nekoosa, Wisconsin, or other authorized representative thereof bearing this release to, within one year of its date, obtain information and records pertaining to me from any or all of the following sources:

- 1. Municipal, State and Federal Law Enforcement agencies
- 2. Selective Service System
- 3. Any Banking institution
- 4. Any place of business (for obtaining employment or credit data)
- 5. Credit rating bureaus or institutions maintaining individual credit files
- 6. Any previous employer
- 7. Present employer
- 8. Any School, college, university or other educational institution
- 9. Any law enforcement certification or licensing board of Wisconsin or any other state

Exceptions to this blanket authorization:

1.		-	of any source named abovericans With Disabilities A	-
2.				
3.				
emplo	yer, to obtain the ab	ove information. It is ur	Rome, Nekoosa, Wisconsin Iderstood that said inform I not be further disseminat	ation shall be used
Date:		Signature:	(full name)	
		Address:		
		City	State	Zip
		Date of Birth:		
Witne	SS:			