CITY OF STURGEON BAY EMPLOYMENT APPLICATION

All applicants for employment must complete a standard City of Sturgeon Bay employment application. Resumes and other appropriate certificates may be attached and submitted along with a completed application. Resumes may not be submitted in lieu of the Application.

The City of Sturgeon Bay is an equal opportunity employer and fully subscribes to the principles of Equal Employment Opportunity. It is the policy of the City of Sturgeon Bay to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal or state law. As an equal opportunity employer, the City of Sturgeon Bay intends to comply fully with all federal and state laws and the information requested on this application will not be used for any purpose prohibited by law. Disabled applicants may request any needed accommodation.

PLEASE PRINT PLAINLY - BE SURE TO SIGN THIS APPLICATION

Name: Last First Middle Address:	Date			
Address: Street City State Zip Home Phone:	Name:			
Street City State Zip Home Phone:	Last	First		Middle
Street City State Zip Home Phone:	Address:			
Email Address: Soc. Security No Have you ever applied for employment with us before: □ Yes □ No If yes, when (month and year)	Street	City	State	Zip
Have you ever applied for employment with us before: □ Yes □ No If yes, when (month and year)	Home Phone:	Cell Phone:	Business Phone:	
If yes, when (month and year)	Email Address:		_ Soc. Security No	
If yes, when (month and year)				
Have you been previously employed by the City of Sturgeon Bay? □ Yes □ No If yes, when? In what capacity? Who referred you to the City of Sturgeon Bay: □ Our Advertisement □ City Web Site □ Job Service □ Cable TV Govt/Public Access Channel □ Employment Agency □ Friend/Relative □ No One EMPLOYMENT DESIRED Position(s) applied for □ Full time □ Part time If part time, what days and hours are you available?	Have you ever applied for emp	loyment with us before:	Yes 🗆 No	
If yes, when? In what capacity? Who referred you to the City of Sturgeon Bay: Our Advertisement City Web Site Job Service Cable TV Govt/Public Access Channel Employment Agency Friend/Relative No One EMPLOYMENT DESIRED Position(s) applied for	If yes, when (month and year)			
If yes, when? In what capacity? Who referred you to the City of Sturgeon Bay: Our Advertisement City Web Site Job Service Cable TV Govt/Public Access Channel Employment Agency Friend/Relative No One EMPLOYMENT DESIRED Position(s) applied for	Have you been previously emr	loved by the City of Sturgeon	Bav? □ Ves □ No	
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Cable TV Govt/Public Access Channel Employment Agency Friend/Relative No One <u>EMPLOYMENT DESIRED</u> Position(s) applied for	If yes, when?	In what c	apacity?	
Cable TV Govt/Public Access Channel Employment Agency Friend/Relative No One <u>EMPLOYMENT DESIRED</u> Position(s) applied for				
Position(s) applied for				
□ Full time □ Part time If part time, what days and hours are you available?	EMPLOYMENT DESIRED			
If part time, what days and hours are you available?	Position(s) applied for			
	\Box Full time \Box Part time			
Date available to start Salary requirement	If part time, what days and hou	rs are you available?		
	Date available to start		Salary requirement	

List names and relationships of any relatives who are City of Sturgeon Bay employees:

PERSONAL DATA		
Are you legally eligible for employment in the United States? \Box Yes \Box No		
Are you at least eighteen years old? Yes No		
Have you ever been convicted of a felony? \Box Yes \Box No		
If you answered 'yes' to the question above, please indicate the nature of the conviction, the date of the conviction, and the state in which you were convicted:		

EDUCATION					
	Name and Location of <u>School</u>	No./Years Completed	Did you <u>Graduate</u>	Course of <u>Study</u>	Degree
High School					
College					
Other					
List any special skills or qualifications which you feel are relevant to the job for which you are applying:					

MILITARY
Branch
What were you duties?
Did you receive any specialized training? □ Yes □ No
If yes, describe
If you were discharged or separated from military service, was the type of discharge bad conduct, dishonorable, or other than honorable discharge, or under an entry-level separation? \Box Yes \Box No

EMPLOYMENT HISTORY

Please give accurate and complete information. Start with present or most recent employer. Please attach additional pages, if necessary.

Company Name	Telephone No		
Address	Employed from mo./yr /	to mo./yr	/
Name of Supervisor	Hourly Pay: Start	Last	
Position and Responsibilities			
Reason for Leaving			
Company Name	Telephone No.		
Address	Employed from: mo./yr/	to mo./yr	/
Name of Supervisor	Hourly Pay: Start	Last	
Position and Responsibilities			
Reason for Leaving			
	Telephone No		
- F. J	I		
	Employed from mo./yr/	to mo./yr	/
Address			
Address Name of Supervisor	Employed from mo./yr/	Last	
Address Name of Supervisor	Employed from mo./yr /	Last	
Address Name of Supervisor Position and Responsibilities	Employed from mo./yr /	Last	
Address Name of Supervisor Position and Responsibilities Reason for Leaving	Employed from mo./yr/Hourly Pay: Start	Last	
Address Name of Supervisor Position and Responsibilities Reason for Leaving	Employed from mo./yr / Hourly Pay: Start	Last	
Address Name of Supervisor Position and Responsibilities Reason for Leaving Company Name	Employed from mo./yr/Hourly Pay: Start	Last	
Address	Employed from mo./yr/Hourly Pay: Start	Last	
Address	Employed from mo./yr / Hourly Pay: Start Telephone No Employed from mo./yr /	Last	/
Address	Employed from mo./yr/	Last	/
Address	Employed from mo./yr/	Last	/

Company Name	Telephone No		
Address	Employed from mo./yr /	to mo./yr/	
Name of Supervisor	Hourly Pay: Start	Last	
Position and Responsibilities			
Reason for Leaving			

REFERENCES				
May we communicate with your present employer? \Box Yes \Box No				
List three people (no relatives) you have worked with and whom we may contact for a reference.				
Name	Address	Phone		
Name	Address	Phone		
Name	Address	Phone		

Please read the following statements carefully before you sign your name.

I HEREBY CERTIFY that the answers given by me to the above questions and statements are true and correct and hereby authorize you to contact references, past or present employers, persons, schools, law enforcement agencies and any other sources of information which may be relevant to my application for employment. It is understood and agreed that any misrepresentation, false statement or omissions by me in the Application will be sufficient reason for rejection of my application or for dismissal at any time during my employment, without liability to the City of Sturgeon Bay. This includes furnishing a false name or social security number. *I have read, understand and agree to the above statement*. (Please initial here).

I further understand that no representative of the City of Sturgeon Bay has the authority to enter into any agreement for employment for any specified period of time and that the City of Sturgeon Bay is not guaranteeing employment for anyone. No employment contract is created by virtue of my being hired by the City of Sturgeon Bay. *I have read, understand and agree to the above statement.* (Please initial here).

If employed, I agree to abide by all of the work and safety rules of the City of Sturgeon Bay. I understand that the City of Sturgeon Bay is committed to maintaining a drug-free workplace. I am aware that the City of Sturgeon Bay may require a drug test as part of the hiring process. Also if employed, I realize that the City may conduct post-accident, reasonable suspicion, periodic and/or random drug and/or alcohol testing of its employees. *I have read, understand and agree to the above statement*. (Please initial here).

I understand that for Police & Fire, residency within 15 miles of City limits, is a requirement of employment with the City of Sturgeon Bay, and agree that if hired I must establish said residency within 6 months of employment. (Please initial here).

I understand that this application will remain on file for sixty days for consideration. After sixty days, if I am still interested in a position with the City of Sturgeon Bay, it will be necessary for me to complete a new application form.

AUTHORIZATION AND RELEASE

All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may be cause for rejection or may be cause for subsequent dismissal if I am hired.

I voluntarily and knowingly authorize any employer, past or present, person, firm, corporation, school or government agency, its officers, employees and agents to release any and all information concerning my employment or suitability for future employment to the City of Sturgeon Bay, its officers, employees and agents, or any other person or entity making a written or oral request for such information on its behalf. I understand that the employment information requested may include, but is not necessarily limited to performance evaluations and reports, job descriptions, disciplinary reports, letters of reprimand, opinions, and public record information regarding my suitability for employment. In addition, I recognize that a copy of this authorization and release is as valid as the original and should be considered as such.

I voluntarily and knowingly, fully release and discharge, absolve, indemnify and hold harmless such employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs, including attorney's 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 facts concerning my employment made for the express purpose of preventing me from obtaining employment which the officer, employee or agent disclosing such facts knows are untrue.

Candidate's Signature

Date

Witness' Signature

Date