Village of Coloma PO Box 353, 155 N Front St., Coloma WI 54930 (715)228-2871 fax (715)228-2873

EMPLOYMENT APPLICATION

The Village of Coloma is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, age, sex, religion or national origin

APPLICANT PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE ANSWERING ANY QUESTIONS

- 1. Please print or type all information. Answer all questions as completely as space will permit. Failure to complete application may prohibit you from proceeding in the evaluation process for this position.
- 2. Statements made in this application are subject to verification. The detection of false statements is a cause for disqualification or dismissal.
- 3. Date and sign the application on page 4.
- 4. Keep a copy of application materials for your files.

Position Applying For	Full-Time	D Port
Time		
How did you find out about the position you are applying for?		

Personal Information						
First Name	М.	Last Name			Suffix	
Address		City		State	Zip	
Daytime Phone		Cell Phone				
() -		() -			
E-Mail						
Are you legally entitled to work in the United Sta	ates? 🗆 `	Yes 🛛 No				
Are you age 18 or over?		Yes 🛛 No	If no, enter date of bir	th:		
Do you possess a valid Driver's License?	. .	Yes 🛛 No	License #:			
Do you possess a valid Commercial Driver's License?		Yes 🛛 No	If yes, check all that a	pply: 🗆 A 🗆 B	OC OD OH ON	
Special skills and qualifications that may apply	to the posit	t ion (please inc	lude all computer softwar	e which you can	operate skillfully)	
List any memberships in professional or technical associations						
Current certifications, licenses, or registrations	as a memb	er of a trade o	r profession			

Education and Training (Attach copies of transcripts, diplomas and/or certificates-except high school)							
Name and Location of High School:							
Highest Grade or Year Completed:	Do you hav equivalency	e a high school Diploma or /?	GED	🗆 Yes 🗖 No			
Training Beyond High School (0	College or Univ	ersity, Business College or	other schools you h	nave attended)			
Name and Location		Dates Attended	Graduated?	Minor/Major			
			🗅 Yes 🗅 No				
			🗆 Yes 🗖 No				
			🗆 Yes 🗖 No				
			🗆 Yes 🗖 No				
			🗆 Yes 🗖 No				
Describe any education and training you have service schools, in-service training, or volunte				spondence courses,			

References (Do not list current or previous employers or relatives)					
Name	Phone Number/Email Address	Occupation/Relationship to Applicant	<u>Years</u> <u>Known</u>		

Employment History (most recent job first)						
Work experience: provide a complete description, start with your most recent job and work back. Be sure to include service in the armed forces. Explain any gaps between periods of employment. If more space is required, continue entries on separate sheet arranged as below and attach to application. Although resumes are welcome, they may not be substituted for the information requested below.						
Name and Location of Employer		Type of Business				
Your Job Title Dates Employed: Image: Full-Time Part-Time Time From:						
Your Duties						
Supervisor's Name: Supervisor's Phone Number:						
May we contact now?	Starting Salary		Ending Salary _			
Reason(s) for leaving						

Name and Location of Employer		Type of Business		
·······		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Your Job Title			Dates Employed:	
		Full-Time Part- Time	From:	To:
		Time	FIOIII.	10.
Your Duties		1		
Supervisor's Name:		Supervisor's Phone Num	iber:	
May we contact now? Yes No	Starting Salary		Ending Salary	
Reason(s) for leaving	•			

Name and Location of Employer	Type of Business		
Your Job Title		Dates Employed:	
	☐ Full-Time ☐ Part- Time	From:	То:
Your Duties			

Supervisor's Name:				Supervisor's Phone Number:
May we contact now?	□ Yes	🗆 No	Starting Salary	Ending Salary
Reason(s) for leaving				

Have you ever been convicted of any violations of law other than minor traffic violations? No

If yes, for what have you been convicted, when, where and penalty imposed?

Note: Convictions are not an automatic bar to employment, but are reviewed in relation to the job for which you applied. Convictions not reported may be cause for discharge.

CAREFULLY READ THIS APPLICATION AND YOUR ANSWERS AND THE CERTIFICATION AND AGREEMENT BELOW BEFORE SIGNING. APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I understand and agree that any misstatements or omissions of material fact herein subject me to disqualification or dismissal.

I authorize the Village of Coloma to make such investigations and inquiries of my personal employment, financial and other related matters as may be necessary at arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application. A copy of this authorization shall be effective as the original.

I authorize the Village of Coloma to make such investigation of my medical history, as may be necessary only after I have received a conditional job offer by the Village of Coloma.

I further understand that in the event of employment by the Village of Coloma, my classification as a permanent employee depends upon my successfully performing work assigned me during a probationary period, where applicable.

I also understand that covered employees are compensated for overtime work in accordance with the Fair Labor Standards Act. Applicants should discuss overtime pay practices with the appointing authority prior to accepting employment with the Village of Coloma.

SIGNATURE OF APPLICANT

DATE

Thank you for completing this application and for your interest in employment with us. We would like to assure you that your opportunity for employment with the Village of Coloma will be based on your merit and qualifications and no other consideration.

Office Use Only						
Interviewed by	Date Interviewed					
Notes, Comments, Recommendations						

Hire date			Wi	/ill Repo	rt On	
Approved by:	Department Head	Administrator	U Village B	Board	Other	
Job Title	Depart	ment	Sa	alary/Ho	ourly Rate	Employee Number