



321 Milwaukee St. | P.O. Box 340, Menasha, WI 54952-0340
 Phone: 920-967-3411 | FAX 920-967-3440

APPLICATION FOR EMPLOYMENT --- PART-TIME/SEASONAL

Instructions:

- 1) Print answers in ink
- 2) Answer all questions on this form
- 3) Date and sign this application on the last page, incomplete applications will be rejected

FULL NAME _____
 Last First Middle Initial

HOME ADDRESS _____
 Number and Street City State Zip Phone Number

SCHOOL ADDRESS _____
 Number and Street City State Zip Phone Number

Are you age 18 or over _____ Yes _____ No

Available for Summer/Seasonal Employment from _____ to _____

Days & hours available _____

Do you have any physical defects or health conditions that would affect your ability to perform the job(s) for which you are applying? No _____ Yes _____ If yes, please explain: _____

List relatives working for Menasha Utilities: _____

Have you ever worked for Menasha Utilities before? _____ Yes _____ No

EDUCATION

Name/Location of High School _____

Did you graduate from high school? _____ Yes _____ No If no, do you have a GED equivalency? _____ Yes _____ No

Circle the Highest Grade or Year completed in school 1 2 3 4 5 6 7 8 9 10 11 12

Circle the number of years in college or university 1 2 3 4 5 6 7 8

Training beyond High School: College, University, Vocational, Technical, or Military schools or other schools you have attended:

Name and Location	Full or Part Time	From Mo/Yr	To Mo/Yr	Major Fields of Study	Degree	Date

Begin with your most recent employment and work back.

1	Company Name	Telephone ()
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving

2	Company Name	Telephone ()
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving

3	Company Name	Telephone ()
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving

List any other skills, training, or qualifications which you feel are relevant to the job(s) for which you are applying (include volunteer and school related activities):

READ CAREFULLY BEFORE SIGNING. The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this Application may result in my dismissal. I authorize investigation of all statements contained in this Application as may be necessary in arriving at an employment decision. This Application shall be considered active for a period of time not to exceed 60 days. I understand that I am required to abide by all rules and regulations of the employer. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

Signature _____

Date: _____