APPLICATION FORM

ATTENTION APPLICANTS - PLEASE READ

Following are important points to know about the City of Menasha application process:

1. **Applications must be completed in full.** Applications not completed in full may be subject to disqualification.

2. A completed application form is required. You may supplement the application form with a resume; however, providing a resume does not exclude you from completing the application form in full.

3. It is to your advantage to be clear and thorough when completing the application, as it is the only means the City has of reviewing your qualifications for employment. We cannot assume more than what you tell us.

4. If you faxed or emailed your application, you still need to mail in or drop off the original application to Human Resources 140 Main Street Menasha WI 54952 in order to be considered for employment.

5. After all the applications are reviewed, the most qualified candidates will be invited to participate in other phases of the hiring process. All applicants are evaluated on job-related factors only.

6. If you are planning to be out-of-town within the next 90 days, please indicate the dates you will not be available on the front section of the application form. Dates of unavailability will be reviewed to determine if any accommodations are feasible.

7. It is the policy of the City of Menasha to provide reasonable accommodations for qualified individuals with disabilities who are applicants for employment. If you are a qualified individual with a disability and need a reasonable accommodation in any phase of our hiring process, please contact the Human Resources Department at (920) 967-3631 or e-mail chuber@ci.menasha.wi.us at least 72 hours (i.e., three (3) work days) in advance. Each request for accommodation will be reviewed on a case-by-case basis and accommodated unless it is determined to be unreasonable.

8. If you are having problems completing the application form or have any questions or concerns, contact the Human Resources Department.

The City of Menasha is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status in the admission or access to, or treatment or employment in, its services, programs or activities.

(APPLICANT MAY RETAIN THIS PAGE)

Human Resources
140 Main Street
Menasha, Wisconsin 54952

Application #_____
(office use only)

Telephone: 920 967-3631
Fax: 920 967-5271

City of Menasha

An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

IMPORTANT: READ THE INSTRUCTIONS CAREFULLY BEFORE FILLING OUT YOUR APPLICATION. EXCEPT WHERE NOTED, ALL REQUESTED INFORMATION MUST BE FURNISHED. THE INFORMATION YOU GIVE WILL BE USED TO DETERMINE YOUR QUALIFICATIONS FOR EMPLOYMENT. PLEASE TYPE OR PRINT.

Dates of unavailability (If you are planning to be out-of-town within the next 90 days, please indicate the dates you will not be available):

_____

Position applied for _____

Name _____
(LAST) (FIRST) (MIDDLE)

Other names under which you have been legally known _____

Address _____
(STREET) (CITY) (STATE) (ZIP)

Phone Number: Home _____ Cell _____

E-Mail Address _____

Are you at least 18 years old? ☐ Yes ☐ No

Do you have the legal right to live and work in the United States? ☐ Yes ☐ No

Do you wish to have the information contained in your application materials remain confidential as permitted by law? ☐ Yes ☐ No

If the job requires use of a motor vehicle, do you have a valid Wisconsin Driver's License? ☐ Yes ☐ No

If the job requires use of a Commercial Driver's License (CDL), do you have a valid CDL? ☐ Yes ☐ No

List CDL classification(s) and/or endorsement(s) _____

EDUCATION AND TRAINING:

Do you have a High School Diploma?	Do you have a GED?	**If no** High School Diploma or GED, circle the highest grade or year completed:
☐ Yes ☐ No	☐ Yes ☐ No	**6 7 8 9 10 11 12**
Name High School:	From Where:	From Where:
City/State:	City/State:	City/State:

Training Beyond High School (Technical College, College, University, or other schools you have attended)

Name and Location	Graduated	Degree Conferred	Major
.....	☐ Yes ☐ No		
.....	☐ Yes ☐ No		
.....	☐ Yes ☐ No		
.....	☐ Yes ☐ No		

List any other education, training, license(s) and/or certificate(s) – be specific and include dates.

_____

_____

_____

WORK HISTORY:

GIVE A COMPLETE RECORD OF ANY EMPLOYMENT, SELF-EMPLOYMENT, MILITARY SERVICE AND/OR VOLUNTEER WORK YOU HAVE. Start with your current or most recent job. Indicate any change in job title under the same employer as a separate position. Although resumes are welcome, they may not be substituted for the information requested below.

PRESENT OR MOST RECENT EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) / TO (MO. & YR.)
		☐ FULL TIME ☐ PART TIME (_____HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING $_____PER_____ ENDING $_____PER_____

EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) / TO (MO. & YR.)
		☐ FULL TIME ☐ PART TIME
		(_____HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		$_____PER_____ $_____PER_____

EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) / TO (MO. & YR.)
		☐ FULL TIME ☐ PART TIME
		(_____HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		$_____PER_____ $_____PER_____

EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
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		(_____HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		$_____PER_____ $_____PER_____

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		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		$_____PER_____ $_____PER_____

EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
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YOUR DUTIES		FROM (MO. & YR.) / TO (MO. & YR.)
		☐ FULL TIME ☐ PART TIME
		(_____HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING
		$_____PER_____ $_____PER_____

Use a separate sheet to continue with any additional qualifying employment data, using same format as above.

If you were discharged for cause from any employment, state the details: _____

_____

List any equipment, machines, tools, or computer software you are skilled in using.

_____

_____

_____

VIOLATIONS OF LAW: A Police background check may be conducted prior to a job offer.

Are you currently subject to a pending charge? ☐ Yes ☐ No

If yes, what is the pending charge? _____

_____

Have you ever been convicted of operating a vehicle while intoxicated (OWI) or any other violations of law excluding minor traffic violations? ☐ Yes ☐ No

If yes, list and detail what you have been convicted of, date and location of conviction, and the penalty imposed: _____

_____

_____

(The City, as a matter of explicit policy, does not use pending charges or convictions as the sole criteria in its employment decisions; they will be considered only if there is a substantial relationship to the circumstances of the particular job or if bondability is at issue.)

Have you applied with the City of Menasha before? ☐ Yes ☐ No If yes, for what position(s) and when? _____

_____

CERTIFICATION AND AGREEMENT

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

I authorize the City of Menasha to make such investigations and inquiries of my employment, character, qualifications, and medical history as may be necessary in arriving at an employment decision. I hereby release all employers, companies, schools or persons from all liability in responding to such inquiries made in connection with my application.

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

_____ _____

(DATE) (SIGNATURE OF APPLICANT)

(FOR HR OFFICE USE ONLY)

Comments: _____

_____

_____

ADDITIONAL INFORMATION

This form MUST be returned with your application materials.

The City of Menasha is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status.

To help us comply with Federal/State Equal Employment Opportunity record keeping and other legal requirements, please answer questions below.

Position applied for _____

Name _____
(LAST) (FIRST) (MIDDLE)

Completion of this part of the form is voluntary. The information you provide will not be used in the decision to hire. If you choose not to complete this section, proceed to the bottom of the form for your signature and date.

Sex: ☐ Male ☐ Female Birth date _____/_____/_____ (MM / DD / YYYY) Age _____

Veteran Status: ☐ Veteran ☐ Non-Veteran ☐ Disabled Veteran, Disability Rating _____%

Ethnic Group:

- ☐ **Black** (Not of Hispanic Origin) – All persons having origins in any of the Black racial groups of Africa.
- ☐ **Asian or Pacific Islander** – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
- ☐ **American Indian or Alaskan Native** – All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- ☐ **Hispanic** – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish Culture or origin, regardless of race.
- ☐ **White** (Not of Hispanic Origin) – All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Do you consider yourself to be disabled? ☐ Yes ☐ No

[A disabled individual is: any person who has a physical or mental impairment which substantially limits one or more of such person's major life activities, or has a record of such impairment or is regarded as having such impairment. Major life activities which might be substantially limited by such impairment include: walking, talking, or otherwise communicating, self-care, socialization, work training, employment, transportation or adaptation to housing (these are examples only).]

If yes, what is the disabling condition?_____

What limitations does this condition impose on major life activities?_____

How did you hear about this job? (Please specify where applicable.)

☐Word of Mouth	☐Employee	☐ School _____
☐ Appleton Post Crescent	☐ Job Service DWD	☐ Other Website _____
☐ City Website	☐ Other	☐ Other Advertisement _____

The above-completed information is true to the best of my knowledge:

_____ (DATE) _____ (SIGNATURE)