

## City of Viroqua Employment Application

124 W. Decker St. Viroqua, WI 54665 608-637-7186

Position Applied for:				Date Submitted:	
Applicant Info	(Please Print)				
Last Name:	First Name:			Middle Name:	
Address:					
Telephone Number(s):		Social Se	curity #:		
Have you ever filed an a	application with us before?	[ ] Yes	[ ] No	If yes, give date:	
Have you ever been employed with us before?		[ ] Yes	[ ] No	If yes, give date:	
Are you currently employed?		[ ] Yes	[ ] No		
May we contact your present employer?		[ ] Yes	[ ] No		
On what date would yo	u be available for work?				
Are you available to work: [ ] full-time		[ ] part	-time	[ ]shift work	[ ] temporary
Are you currently on lay	y-off status and subject to recall?	[ ] Yes	[ ] No		
Can you travel if a job requires it?		[ ] Yes	[ ] No		
Education					
	Name and Address of School	Course o	f Study	Year(s) Completed	Diploma/Degree
High School					
Undergraduate School					
Graduate School					
Technical School					
Other (specify)					
Describe any specialize	d training, apprenticeship or skill:	s. Include an	y job-relate	ed training received i	n the U.S. military.

## **City of Viroqua - Employment Application**

124 W. Decker St. Viroqua, WI 54665 608-637-7186

Employment Experience Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status. If you need more room, please submit an additional attachment.

Employer Name:	Dates Employed	From:	To:
Employer Address:	Hourly Rate/Salary	Start:	Final
Phone Numbers	Supervisor Name(s)		
Job Title(s)	Reason for Leaving		
Work Performed	1000011012001116		
Employer Name:	Dates Employed	From:	To:
Employer Address:	Hourly Rate/Salary	Start:	Final
Phone Numbers	Supervisor Name(s)		
Job Title(s)	Reason for Leaving		
Work Performed			
	T	T	
Employer Name:	Dates Employed	From:	То:
Employer Address:	 Hourly Rate/Salary	Start:	Final:
Phone Numbers	Supervisor Name(s)		
Job Title(s)	Reason for Leaving		
Work Performed			
Employer Name:	Dates Employed	From:	То:
Employer Address:	Hourly Rate/Salary	Start:	Final:
Phone Numbers	Supervisor Name(s)		
Job Title(s)	Reason for Leaving		
Work Performed			

## **City of Viroqua - Employment Application**

124 W. Decker St. Viroqua, WI 54665 608-637-7186

## **Additional Information**

Other Qualifications - Special job-rela	ted skills and qualifications acquired from employment or other experience	e.
State additional information you feel	may be helpful in considering your application:	
<u> </u>		
Professional References - Applicants r	nust include references for current or last employment.	
Reference 1	<u> </u>	
Name:	Phone Number(s)	
Address:		
Reference 2		
Name:	Phone Number(s)	
Address:		
Reference 3		
Name:	Phone Number(s)	
Address:	<u>,                                      </u>	
<u> </u>		
Applicant Signature	Date	