

**TOWN OF GORDON PO BOX 68 GORDON WI 54838**

APPLICANT INFORMATION			
Last Name		First	M.I.      Date
Street Address		Mailing Address	
City		State	ZIP
Phone		E-mail Address	
Date Available	Social Security No.		Desired Salary
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?      YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate?      YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate?      YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate?      YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

OTHER RELEVANT SKILLS & TRAINING (WELDING, MACHINE EXPERIENCE, ETC)

CDL HOLDERS ONLY: ARE YOU 21 YEARS OF AGE OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO
DRIVER'S LICENSE #:      STATE:      EXPIRATION DATE:

CLASS OF EQUIPMENT AND TYPE OF EQUIPMENT YOU ARE FAMILIAR WITH:

TRAFFIC CONVICTION (PAST 3 YRS, OTHER THAN PARKING) AND ACCIDENT RECORD: INDICATE DETAILS ON BACK OF PAGE, IF NECESSARY:

PREVIOUS EMPLOYMENT			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

REFERENCES: LIST 3 INDIVIDUALS NOT RELATED TO YOU			
NAME:	ADDRESS:	TELEPHONE #:	YEARS KNOWN:

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date