Town of Pleasant Springs Employment Application Form

Note: Applicants May Be Tested For Illegal Drugs

<u>Application must include a cover letter and resume. Please Return Application</u> and Cover letter to 2354 County Rd N, Stoughton, WI 53589-2873

Please Complete Pages 1-4.		Date			
Name					
Last		First	Middle		Maiden
Present address _					
	Number	Street	City	State	Zip
How long		Telephone ()		
Position applied for		and salary desired			
How many hours	can you work week	ly?	Can you	work nights	s?
Employment desir	red:Full-Time O	nlyPart-T	ime Only	Full or P	art Time
When available fo	r work?				
Type of School	Name of School	Location	Number o	f Years	Major/
		(Complete	Complet	ed	Degree
High School		Mailing Address)			
College					
Bus./Trade School	N .				710
Professional Scho	ool				

Have you ever been convicted of a crime?NoYes If yes, explain number of conviction(s), nature of offense(s) leading to convictions(s), how recently such offense(s) was/were committed, sentences(s) imposed, and type(s) of rehabilitation						
Do you have a Driver's License?Yes No What is your means of transportation to work?						
Driver's License Number	Expiration Date Commercial (CDL) Chauffeur					
State of Issue Operator	Commercial (CDL) Chauffeur					
Have you had any accidents during the	past three years? How Many?					
Have you had any moving violations during the past three years?						
How many?						
OFFI	CE ONLY					
TypingYesNoWPM						
Personal ComputerYesNoPC	CMac					
10-KeyYesNo	DN 4					
Word ProcessingYesNoW						
Other Skills						
Please list two references other than re	elatives or previous employers.					
Name	Name					
Position	Position					
Company	Company					
Address	Address					
Telephone ()	Telephone()					
1 elephone ()	/ Cicpriona(
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.						

Work Experience

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer	Employment Dates	Pay/Salary
Address	From	Start
City, State, Zip	To	Final
Phone Number	<u> </u>	
Job Title	Name of last supervisor	16%
Reason for leaving (be specific)		
List the jobs you held, duties perfor promotions while you worked at this		ncements or
Name of employer		
Address		Start
City, State, Zip		Final
Phone Number		
Job Title		
Reason for leaving (be specific)		
List the jobs you held, duties perfor promotions while you worked at this		ncements or
Name of employer		
Address		Start
City, State, Zip		Final
Phone Number	Name of last augentions	
Job Title		
Reason for leaving (be specific)		
List the jobs you held, duties perform		ncements or
promotions while you worked at thi	s company.	

Name of employer	Employment Dates	Pay/Salary
Address	From	Start
City, State, Zip	From To	Final
Phone Number		
Job Title	Name of last supervisor	
List the jobs you held, duties pe promotions while you worked a	erformed, skills used or learned, adva	ncements or
May we contact your present e	employer?YesNo	
The above information is a	a true and correct statement.	
Signature of Applicant		
Date		