



City of Monona Employment Application

This application is to be completed by applicant only. If you are physically unable to fill out this application, you may request reasonable accommodation in completing the form. Exclude any reference that may reveal or tend to reveal your race, color, religion, national origin, creed, age, marital status, sex, sexual orientation or disability. You are not required to furnish any information which is prohibited by federal, state, or local law.

- Answer all questions; incomplete applications may not be considered.
- Please print neatly.
- Date and sign application.
- Return application to: **City of Monona, 5211 Schluter Rd., Monona, WI 53716**

Today's Date _____
Application for Position of: _____ Department: _____
Indicate what types of employment interest you (check all that apply):
<input type="checkbox"/> Permanent Full Time <input type="checkbox"/> Permanent Part Time <input type="checkbox"/> Hourly Part Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Internship
Date available: _____ May we communicate with your present employer? <input type="checkbox"/> YES <input type="checkbox"/> NO

Applicant Information

Full Name: _____	
Address: _____	
<i>Street Address</i>	
_____ <i>City, State, ZIP Code</i>	
Home Phone: () _____	Cell/Other Phone: () _____
E-mail address: _____	
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you legally eligible for employment in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Do you have a valid driver's license? YES <input type="checkbox"/> NO <input type="checkbox"/> Do you have a valid Commercial Driver's License (CDL)? YES <input type="checkbox"/> NO <input type="checkbox"/>	

List all instances in which you were convicted as an ADULT for crimes (misdemeanors or felonies), ordinance violations, traffic violations and the like. Also, list all criminal charges (misdemeanors or felonies) currently pending against you. Failure to include all information requested under this section may result in denial of employment. A conviction record or pending arrest record does not constitute an automatic bar to employment and will be considered only if there is a substantial relationship to the circumstances of the particular position or if the employer deems there is a bona fide occupational qualification inherent in the position which requires this information prior to hiring.

Date (or Approximate Date)	Location	Charge	Court	Disposition of Case

Education

High School: _____	City/State: _____
List the highest grade completed in school: _____	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Do you have a GED? YES <input type="checkbox"/> NO <input type="checkbox"/>
Training beyond high school: please list college, university, nursing, business college or other schools you have attended:	

Name	Location	Major Field	Credits Earned	Degree Received	GPA

Please list any other organizations to which you belong or have belonged, training, or awards and honors you've received which you feel are relevant to the job for which you are applying:

References

Please list three professional references.

Name: _____ Company: _____

Address: _____ Phone: (____) _____

Name: _____ Company: _____

Address: _____ Phone: (____) _____

Name: _____ Company: _____

Address: _____ Phone: (____) _____

Work Experience

Please begin with your most recent position. Be sure to include service in the armed forces.

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Your Job Title: _____ Starting Salary: _____ Ending Salary: _____

Duties: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Your Job Title: _____ Starting Salary: _____ Ending Salary: _____

Duties: _____

From: _____ To: _____ Reason for Leaving: _____

Work Experience (continued)

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Your Job Title: _____ Starting Salary: _____ Ending Salary: _____

Duties: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Your Job Title: _____ Starting Salary: _____ Ending Salary: _____

Duties: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Your Job Title: _____ Starting Salary: _____ Ending Salary: _____

Duties: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Your Job Title: _____ Starting Salary: _____ Ending Salary: _____

Duties: _____

From: _____ To: _____ Reason for Leaving: _____

Work Experience (continued)

Company: _____	Phone: (____) _____	
Address: _____	Supervisor: _____	
Your Job Title: _____	Starting Salary: _____	Ending Salary: _____
Duties: 		
From: _____	To: _____	Reason for Leaving: _____

Authorization and Signature

I understand that after receiving a conditional offer of employment, I may be required to successfully pass pre-employment and post-employment exams to gain employment or continue employment with the City of Monona.

I consent freely and voluntarily to participate in required drug tests and/or a pre-employment physical exam at a location selected by the City of Monona, and I consent to the release of the test results to the City of Monona.

I hereby release and hold harmless the City of Monona, their officers, agents and employees, and the laboratory, their employees, agents and contractors from any liability whatsoever, arising from the drug tests and/or a pre-employment exam and decisions concerning employment based upon the results of the tests.

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: _____

City of Monona
5211 Schluter Rd.
Monona, WI 53716
(608) 222-2525
www.mymonona.com