



City of Independence

23688 Adams Street – Independence, WI 54747

(715) 985-3055 – Fax (715) 985-2530

www.independencewi.org

Employment Application

The City of Independence is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of age, race, creed, color, disability or handicap, marital status, sex, national origin, ancestry, sexual orientation, arrest or conviction record, or veteran status.

Applications are accepted for posted positions only. Resumes will not be accepted without an application. Print clearly, be specific and complete, and sign your application. You will be expected to answer all questions truthfully and completely. Any failure to provide factual responses to this application will result in a finding by the City of fraudulent misrepresentation which can result in either the rejection of your application or your termination. If you have questions when completing this application, please contact the City Clerk for assistance.

Position Applying For:		Date:	
Full Name:			
Address:			
City:		State:	Zip Code:
Home Phone:		Cell Phone:	
E-mail Address (if any)			

Are you eligible to work in the United States? ☐ Yes ☐ No
(If offered employment, you will be required to provide documentation to verify eligibility)

Have you ever worked for the City of Independence? ☐ Yes ☐ No
If yes, when and in what capacity? _____

Are any relatives presently employed by the City of Independence? ☐ Yes ☐ No

Were you ever discharged or asked to resign from any prior position you have held with any employer?
☐ Yes ☐ No If yes, please explain by fully identifying the prior employer, the date of your involuntary resignation and/or termination and the reason for your departure from that employer:

Are you 18 years of age or older? ☐ Yes ☐ No

Do you possess a valid Wisconsin driver's license? ☐ Yes ☐ No

Do you possess a valid driver's license from another state? ☐ Yes ☐ No

Do you possess a valid Wisconsin commercial driver's license? ☐ Yes ☐ No

Have you ever been convicted of a criminal violation, meaning any conviction other than for a minor traffic or ordinance offense? ☐ Yes ☐ No

Education	Name & Location of School	No. of Years Attended	Did You Graduate	Subjects Studied
Grammar School				
High School				
College				
Trade, Business of				

Specialized Training, Apprenticeships, Computer Skills:

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Employment: List most recent employment first (do not write "see resume" in the spaces below)

Name and Address of Company	
Dates of Employment:	Salary:
Name and Title of Supervisor:	Phone:
Job Title:	
Duties:	
Reason for leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Name and Address of Company	
Dates of Employment:	Salary:
Name and Title of Supervisor:	Phone:
Job Title:	
Duties:	
Reason for leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name and Address of Company	
Dates of Employment:	Salary:
Name and Title of Supervisor:	Phone:
Job Title:	
Duties:	
Reason for leaving:	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

References

Give three references (not relatives, or present employer; avoid listing members of the clergy). Name: Position: Numbers of Years Acquainted: Address: City/State/Zip: Telephone Number:

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By signing below, I certify that all statements made on this application are true and correct. I understand that all information is subject to verification, I also understand that any falsification will disqualify me from employment or, if already employed, will result in dismissal. My signature authorizes the City of Independence to do a background check and reference check and obtain information and records about me from; any licensing authority, any educational institutions, any current and former employers or other references, and any information needed to complete a criminal background check. I understand that I may be asked to undergo a physical examination, including substance abuse screening, prior to appointment to a position with the City of Independence; I also understand that refusal to participate will result in the withdrawal of any offer of employment, I hereby release any individual, institutional or business, including its officers or employees from any and all liability for damages arising from a good faith attempt to comply with this authorization and release. A copy of this release is as good as the original.

Signature	Date
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NOTICE TO ALL APPLICANTS

Wisconsin State Statutes, Section 19.36(7), 64.09(5), and 64.11(7) require public employees to treat the following items as a public record: Each applicant's

- Application
- Qualifications
- Records
- Recommendation

Except as provided in Section 19.36(7), Wisconsin State Statutes, which allows the identity of an applicant to remain confidential if the applicant requests in writing that the City not provide access to this information.

If you choose not to have this information become public record, you must make such a request in writing to the City of Independence City Clerk. If you become a finalist for a City position, your identity may be disclosed as required.