

WESTBY
200 N. Main St.
Westby, WI 54667

City Clerk/Treasurer
Phone: (608) 634-3214
Fax: (608) 634-3274

Electric & Water Utility and Public Works Dept.
Phone: (608) 634-3416
www.cityofwestby.org

Application for Employment

The City of Westby and Westby Electric & Water Utility is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of any characteristic protected by law, including race, color, religion, age, sex, national origin, or disability.

Desired Position: _____ **Date Available to Start:** _____

Personal

Full Name: _____

Address: _____

Phone: Home: _____ Cell: _____ Other: _____

Salary Requirement: _____

Are you over 18 years of age? Yes No

Do you have a valid Driver's License? Yes No
Number: _____ State: _____

Have you ever worked for the City of Westby? Yes No
If yes, when? _____

Are you legally allowed to work in the United States: Yes No

Type of employment desired: Full-Time Part-Time Temporary

During the last 7 years, have you been convicted of a crime other than a minor traffic offense? Yes No
If yes, give dates and details: _____

Answering yes to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Education Please indicate education or training that you believe qualifies you for the position you are seeking.

High School:

Number of Years Completed (circle one) 1 2 3 4
Diploma: ___Yes ___No G.E.D.: ___Yes ___No
School: _____ City/State: _____

College and/or Vocational School:

Number of Years Completed (circle one) 1 2 3 4 5 6
Major: _____ Degree Earned: _____
School: _____ City/State: _____

Other Training or Degree(s):

Major: _____ Degree/Certificate Earned: _____
School: _____ City/State: _____

Specialized Skills (i.e. typing, computers, welding, sales, driving, etc.)

Employment List last employer first, including U.S. Military Service.

May we contact your current employer? ___Yes ___No

1. Employer _____
Address _____
Telephone _____
Position _____
Employed From _____ to _____
Starting Salary _____ Ending Salary _____
Supervisor _____ (circle one) Full-Time / Part-Time
Duties _____

Reason for Leaving _____

Employment (continued)

2. Employer _____
Address _____
Telephone _____
Position _____
Employed From _____ to _____
Starting Salary _____ Ending Salary _____
Supervisor _____ (circle one) Full-Time / Part-Time
Duties _____

Reason for Leaving _____

3. Employer _____
Address _____
Telephone _____
Position _____
Employed From _____ to _____
Starting Salary _____ Ending Salary _____
Supervisor _____ (circle one) Full-Time / Part-Time
Duties _____

Reason for Leaving _____

4. Employer _____
Address _____
Telephone _____
Position _____
Employed From _____ to _____
Starting Salary _____ Ending Salary _____
Supervisor _____ (circle one) Full-Time / Part-Time
Duties _____

Reason for Leaving _____

References

Professional

Name _____ Relationship _____
Company _____ Title _____
Address _____
Phone Number(s) _____

Name _____ Relationship _____
Company _____ Title _____
Address _____
Phone Number(s) _____

Personal

Name _____ Relationship _____
Company _____ Title _____
Address _____
Phone Number(s) _____

Name _____ Relationship _____
Company _____ Title _____
Address _____
Phone Number(s) _____

I hereby that the facts set forth in the above employment application are true and complete to the best of my knowledge, and authorize the City of Westby to verify their accuracy and to obtain reference information on my work performance. I hereby release the City of Westby from any and all liability of whatever kind and nature, which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if I am employed by the City of Westby, falsified statements of any kind or omissions of fact called for on this application shall be considered sufficient basis for dismissal. I authorize the City of Westby to make a thorough investigation of all statements contained in this application about my past employment, education, and other activities. I release from liability all persons and organizations supplying such information.

Signature of Applicant _____ Date _____