

TOWN OF HOLLAND  
APPLICATION FOR EMPLOYMENT

MAILING ADDRESS  
TOWN OF HOLLAND  
W7937 CO RD MH  
HOLMEN WI 54636

The Town considers all applicants without regard to race, color, religion, creed, gender, natural origin, age, disability, marital or veteran status, or any other legally protected status.

Date of Application _____		Position(s) Applied For _____	
Name _____			
Last	First	Middle	
Address _____			
Number	Street	City	State      Zip Code
Contact Number(s) _____		Social Security # _____	
If you are under 18 years of age, a work permit is required.		Drivers License # _____	
Best time to contact you _____ am / pm		Email _____	

How Did You Learn About Us?	Advertisement _____	Friend/Relative _____	Inquiry _____
Employment Agency _____	Other _____		

Have you ever been employed here before? _____		If yes, give date _____	
Are you currently employed? _____		May we contact you present employer? _____	
Date available for work _____		What is your desired salary range? _____	
Are you able to work:		Full Time _____	Part Time _____      Temporary _____
Are you currently on "lay-off" status and subject to recall? _____		Do you have a CDL License? _____	
Other Certifications _____ (Attach photocopy of certifications: Lifeguard Training, WSI, First Aid, CPR, etc.)			
A. Have you ever pleaded guilty to or been convicted of a misdemeanor or felony? _____			
B. Do you have any pending criminal charges? _____			
If yes to either A. or B. above, please explain. Include date(s), location of court, nature and place of charge or conviction and disposition of the case. (Conviction will not necessarily disqualify an applicant from employment.)			
_____			
_____			

**EDUCATION**

School	Name/City/State	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

**PERSONAL/PROFESSIONAL REFERENCES** *(Do not include family members)*

Name	Telephone Number	Best Time to Call	Occupation
1.			
2.			
3.			

## WORK EXPERIENCE

Start with your present or last job. Include any job-related military experience and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, natural origin, disabilities or other protected status.

Employer	Telephone Number
Address	Dates Employed (From /To)
Job Title	Supervisor
Hourly Rate/Salary	Work Performed
Reason For Leaving	May we contact?

Employer	Telephone Number
Address	Dates Employed (From /To)
Job Title	Supervisor
Hourly Rate/Salary	Work Performed
Reason For Leaving	May we contact?

Employer	Telephone Number
Address	Dates Employed (From /To)
Job Title	Supervisor
Hourly Rate/Salary	Work Performed
Reason For Leaving	May we contact?

List any experience or training that would qualify you for a position with the Town of Holland.


Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? I have received and read the job description and understand the activities involved. Yes \_\_\_\_ No \_\_\_\_

I certify that answers given herein are true and correct and authorize investigation of all statements contained in this application for employment. In the event of employment, I understand that false and misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the Town of Holland.

Signature of Applicant

Date