VERNON COUNTY

Employment Application

Return completed application to <u>hr@vernoncounty.org</u> or Vernon County Personnel, 400 Courthouse Square, Room 102 Viroqua, WI 54665



APPLICANT INFORMATION																				
Last Nam	е							First						M.I.		Dat	e			
Street Address									Apartr	nent/l	Jnit #	<u>t</u>								
City								State						ZIP						
Phone								E-mail A	Address											
Date Avai	ilable												Des	ired Salary						
Position A	Applied	for											•							
Are you a	citizen	of the	e Uı	nited Stat	es?	YES	N	0 🗆	If no, a	are y	ou a	uthorize	ed to w	ork in th	ne U.S	.?	YES	5 🗆	NO [
Have you	ever b	een co	onvi	icted of a	felony?	YES	N	0 🗆	If yes,	exp	lain					<u> </u>				
EDUCAT	TION																			
High Scho							A	ddress												
					Did you g	you graduate?		ES 🗌	NO [Deg	ree								
College							A	ddress												
From		To Did yo		Did you g	graduate?		ES 🗌	NO [Deg	ree									
Other							ddress													
From		To Did you g		ıraduate?	aduate? YES 🗌		NO Degree													
REFERE	REFERENCES																			
			ssio	nal refere	ences.															
Please list three professional references. Full Name					Rela	ation	ship													
Company					Pho	ne														
Address												I								
Full Name								Relationship												
Company										Phone										
Address	ddress																			
Full Name							Rela	ation	ship											
Company							Pho	ne												
Address																				

PREVIO	US EM	PLOYMI	ENT				PREVIOUS EMPLOYMENT							
Company							Phone							
Address					Supervisor									
Job Title					Starting Salary		\$		Ending S	alary	\$			
Responsib	Responsibilities													
From		То		Reason for Leaving	1									
May we co	ontact yo	ur previo	us super	visor for a reference?	,	YES 🗆	NO 🗆							
Company							Phone							
Address							Supervisor							
Job Title					Sta	rting Salary	\$		Ending S	alary	\$			
Responsib	oilities													
From		То		Reason for Leaving	1									
May we contact your previous supervisor for a reference?														
Company			Phone											
	Address						Supervisor							
Job Title Starting Salary Responsibilities			rting Salary	\$		Ending S	alary	\$						
Кезропзіс	Jinues													
From To Reason for Leaving														
May we co	ontact yo	ur previo	us super	visor for a reference?)	YES 🗌	NO 🗆							
14T1 TT 4	DV CED	VICE												
MILITA Branch	KY SEK	AICE						From		То				
	Rank at Discharge					Type of Discharge								
	If other than honorable, explain													
	AGENCY-WIDE QUESTIONS													
				.										
1.	attached	l, that "se	e resum		d for	responses to	questions c	ontained i			y even if a resume is a, and that a resume is not to			
	YES						NO							

	past TEN YEARS FROM TODAY'S DATE, and that any work experience beyond ten years if it is reas	at I am providing a complete list of all my full- and part-time employme I have not omitted any jobs in my work history. I understand that I sl sonably related to the position for which I am applying. I understand t	hould incl
	include military service, if any, in my ten-year wo	NO	
	Did you graduate High School or have you obtain application. Do not include dates of High School.	ed a G.E.D.? If yes, please be sure to include this in the education sec	ction of y
	YES	NO 🗆	
	How long have you lived at your current address?)	
	If your answer to Question 4 was under 10 years	, list your previous address and how long you lived there.	
	Have you been employed by Vernon County befo	re?	
	YES	NO 🗆	
	If you answered yes to Question 6, please provide	e the date, department and under what name you were employed.	
	Are you currently employed?		
	YES	NO 🗆	
Α	re you at least 18 years of age?		_
	YES	NO 🗆	
	Are you currently a member of any reserve?		_
	YES	NO 🗆	
	Do you have any relatives working for Vernon Co	unty or on the County Board of Supervisors?	_
	YES	NO 🗆	
	If you answered yes to Question 11, please give	name, relationship and department.	
	Where did you first hear about this job opportuni	ty?	
1	any amount while on the job, and smelling of alco- cesting, reasonable suspicion drug and alcohol tes	ression of illegal drugs. The policy also covers drug use or alcohol into othol while on the job. I consent/agree to pre-employment drug and alsting of my breath, urine and blood during my employment. I understand that after hire a positive test or policy violation may result in discipled	lcohol and that
	YES	NO 🗆	
	you check yes below, your application materials v	re application materials to be open records unless you request confider will be kept confidential, however, the law requires your information to aw your application. You will be notified before your application is made	be publi
	YES	NO 🗆	

AUTHORIZATION AND ACKNOWLEDGEMENT FOR EMPLOYMENT WITH VERNON COUNTY

I certify that answers herein are true and complete; furthermore, I understand that misrepresentation or omission of facts in this application or during an interview(s) will be cause for cancellation of consideration for employment or dismissal if employed. I certify that any resume or additional information attached is true and complete and that any misrepresentation or omission of facts on these documents will be cause for cancellation of consideration for employment or dismissal if employed.

I authorize an inquiry to be made on the information contained in this application, and I understand for some positions this may include a thorough background investigation. Upon written request, the nature and scope of this inquiry will be made available to me. Former employers named herein are authorized to give information regarding me. They are hereby released from all liability for furnishing such information to Vernon County.

I understand that employment is contingent upon a favorable evaluation and/or results of any pre-employment requirements necessary to perform the position applied for. This may include a health evaluation form, medical examination, alcohol and controlled substance testing, skills testing, aptitude testing, verification of employment or other assessment determined necessary.

This application for employment shall be considered active for the period of time the position applied for is vacant. Any applicant wishing to be considered for employment beyond this time period should reapply.

In addition a copy of this authorization is a valid as the original and should be recognized as such.

NOTICE TO APPLICANTS: The authorization below may be photocopied and sent to previous employers for the purpose of obtaining information regarding previous employment.

IF YOU BECOME A FINALIST FOR THE POSITION, YOUR IDENTITY MAY BE DISCLOSED AS REQUIRED BY LAW.

NOTICE TO APPLICANTS Wisconsin Statues, Sections 19.36 (7), allows the identity of an applicant to remain confidential if the applicant requests in writing that the county not provide access to this information. If you choose not to have this information become a public record, you must make such a request in writing to the Personnel Department.

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ı	Signature	Date	

APPLICA	NT DATA RECORD (PLEASE PRINT)					
As employers/government contractors, we comply with government regulations and affirmative action responsibilities. Solely, to help us comply with government record keeping, reporting and other legal requirements, please fill out the Data Record. This Data is for periodic government reporting and will be kept in a Confidential File separate from the Application for Employment. Government agencies require periodic reports on the gender, ethnicity, handicapped and veteran status of applicants. This data is for analysis and affirmative action only. Submission of information in this section is optional.						
	Position(s) Applied For	Date				
Check one	:					
	_ Male					
	_ Female					
Check one	of the following:					
	_ White (not Hispanic)					
	_ Black (not Hispanic)					
	Hispanic					
	Asian or Pacific Islander					
	_ American Indian or Alaskan Native					
Check if ar	ny of the following are applicable:					
	_ Disabled Veteran					
	_ Handicapped Individual					
	_ Vietnam Era Veteran					