



NAME: _____

POSITION APPLYING FOR:

JOB LOCATION: _____

DATE: _____

SHEBOYGAN COUNTY

EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER M/F/D/V

Applications are accepted only for open positions during a recruitment period. Applications may be submitted to either of the two locations shown below. Your application must be either physically received at either location or mailed and postmarked no later than the end of the recruitment period. Late applications will not be considered unless the recruitment period is extended. Please submit your application to:

State Job Center – Sheboygan
3620 Wilgus Road
Sheboygan, WI 53081
(920) 208-5810

-OR-

Sheboygan County
Human Resources Department
508 New York Avenue
Sheboygan, WI 53081
(920) 459-3105

AMERICANS WITH DISABILITIES ACT NOTICE

The County of Sheboygan would like to accommodate you if you are disabled. Please let us know if you need special assistance. Contact the Sheboygan County Human Resources Department at 920-459-3105, at least 24 hours in advance of the program or activity, so we can make arrangements for you.

Application for Employment

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital, veteran status, or the presence of a medical condition or handicap, which may be reasonable accommodated.

(PLEASE PRINT)

Name _____
Last
First
Middle

Address _____
Street
City
State
Zip

Telephone (_____) _____ Social Security Number _____|_____|_____

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S.? YES NO

SHIFT 1ST FULL TIME
 2ND PART TIME
 3RD SEASONAL

On what date would you be available for work? _____

Have you ever been employed with Sheboygan County before? YES NO

If Yes, state: Dates: _____
 Department: _____
 Position: _____

NAME OF SCHOOL	ADDRESS OF SCHOOL	COURSE OF STUDY	CHECK YEAR COMPLETED				DID YOU GRADUATE	LIST DIPLOMA OR DEGREE
			1	2	3	4		
HIGH	_____						YES	
	_____		1	2	3	4	NO	

COLLEGE	_____						YES	
	_____		1	2	3	4	NO	

OTHER	_____						YES	
	_____		1	2	3	4	NO	

Describe any education or training you have had which is not covered above, such as vocational school, correspondence courses, service schools, in-service training, or volunteer work which you feel is relevant to the job or jobs for which you are applying. Also, include relevant licenses or certificates (Be Specific):

Do you currently have a pending criminal charge against you or have you ever been convicted of a crime, either a misdemeanor or a felony? Yes No

If Yes, please explain: _____

Note: A conviction or pending charge does not constitute an automatic bar to employment and will be considered only if there is a substantial relationship to the position or if the absence of a conviction is a bona fide occupational qualification inherent in the position.

Employment Experience

Start with your present or most recent job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin. Explain any significant gaps in time.

EMPLOYER	DATES EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
JOB TITLE	HOURLY RATE/SALARY		
	STARTING	FINAL	
SUPERVISOR			
REASON FOR LEAVING			
EMPLOYER	DATES EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
JOB TITLE	HOURLY RATE/SALARY		
	STARTING	FINAL	
SUPERVISOR			
REASON FOR LEAVING			
EMPLOYER	DATES EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
JOB TITLE	HOURLY RATE/SALARY		
	STARTING	FINAL	
SUPERVISOR			
REASON FOR LEAVING			
EMPLOYER	DATES EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
JOB TITLE	HOURLY RATE/SALARY		
	STARTING	FINAL	
SUPERVISOR			
REASON FOR LEAVING			

If you need additional space, please use a sheet of paper.

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

If required, do you have a valid Wisconsin Commercial Driver's License? (CDL) Yes No

Endorsements: _____

Describe your computer skills, including which programs you are familiar with: _____

For office or clerical positions, state your approximate keyboarding speed (test may be required): _____ words per minute.

Are you able to perform all the duties of, and work the schedule required for the position you are applying for, with or without reasonable accommodation? Yes No

PERSONAL REFERENCES

Give name, address and telephone number of the three references who are not related to you and are not previous employers.

CONSENT

In considering my application for employment, the county may verify the information on this application and obtain additional information relating to my background.

I authorize all persons, schools, companies, corporations, credit bureaus, and law enforcement agencies to supply any information necessary concerning my background.

I understand that, if employed, any misrepresentation of fact on this application could result in dismissal, no matter how long after employment the misrepresentation is discovered.

I understand that any offer of employment will be contingent upon satisfactory completion of a drug screening, background check, and a physical examination at the county's expense if required.

I hereby affirm that the foregoing information is true and correct.

If this is checked: _____, then I request that the County not contact my present employer without my specific consent.

SIGNATURE _____ DATE _____

CONFIDENTIALITY

I hereby request this application be kept confidential to the degree permitted by Wisconsin law. I understand, however, that if I become a finalist for a position that this application will become a public record.

SIGNATURE _____ DATE _____

APPLICANT DATA RECORD

Failure to respond will have no adverse affect on you or your job status. If you do respond, the information given will be kept confidential and used in accordance with federal regulations.

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

As employers/governmental contractors, we comply with government regulations, including affirmative action responsibilities where they apply.

Solely to help us comply with government recordkeeping, reporting and other legal requirements, we request that you please fill out the Applicant Data Record. We appreciate your cooperation.

This data is for periodic government reporting and will be kept in a Confidential File separate from the Application for Employment. YOUR COOPERATION IS VOLUNTARY.

(PLEASE PRINT)

DATE _____

POSITION(S) APPLIED
FOR _____

REFERRAL SOURCE: ADVERTISEMENT FRIEND RELATIVE WALK-IN
 EMPLOYMENT AGENCY OTHER _____

YOUR NAME _____

LAST

FIRST

MIDDLE

ADDRESS _____

NUMBER

STREET

CITY

STATE

ZIP CODE

VOLUNTARY SURVEY

Government agencies at times require periodic reports on the sex, ethnicity, handicapped, veteran and other protected status of applicants. This data is for analysis and possible affirmative action only. SUBMISSION OF INFORMATION IS VOLUNTARY.

CHECK ONE: MALE FEMALE

CHECK ONE OF THE FOLLOWING:

RACE/ETHNIC GROUP: WHITE BLACK HISPANIC
 AMERICAN INDIAN/ALASKAN NATIVE ASIAN/PACIFIC ISLANDER

CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE:

VIETNAM ERA VETERAN DISABLED VETERAN HANDICAPPED INDIVIDUAL