

# MUKWONAGO FIRE DEPARTMENT

## APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion or national origin.

### PERSONAL INFORMATION

Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_  

(last)
(first)
(middle)

Present Address: \_\_\_\_\_  

(street)
(city)
(state)
(zip)

Permanent Address: \_\_\_\_\_  

(street)
(city)
(state)
(zip)

Phone Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Referred By: \_\_\_\_\_

### EMPLOYMENT DESIRED

Position: \_\_\_\_\_ Date You Can Start: \_\_\_\_\_ Are You Currently Employed? \_\_\_\_\_

May we contact your present employer? \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

### EDUCATION

	Name & Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied and Degree Received
<b>High School</b>		1 2 3 4		
<b>College</b>		1 2 3 4		
<b>Trade, Business or Correspondence School</b>		1 2 3 4		

Subjects of Special Study or Research Work: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Activities Other Than Religious (civic, athletic, etc.): \_\_\_\_\_

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, AGE, SEX, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS.

**Military Service:** Have you ever served in the Military? Yes No If yes, what branch? \_\_\_\_\_

Date of Discharge: \_\_\_\_\_ Honorable Discharge? Yes No If no, explain: \_\_\_\_\_  
 Include copy of discharge papers (DD214) if applicable.

(continued on other side)

## EMPLOYMENT HISTORY

List below the last four employers, starting with the most recent one first.

Date Month and Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From: To:				
From: To:				
From: To:				
From: To:				

## REFERENCES

List below the names of three persons not related to you, who you have known at least one year.

Name	Address	Business	Years Acquainted
1.			
2.			
3.			

Are you related to anyone on the department?  NO  YES - Details \_\_\_\_\_

In case of emergency notify:

\_\_\_\_\_ (name and relationship) \_\_\_\_\_ (address) \_\_\_\_\_ (phone number)

Have you ever been convicted of a felony?  NO  YES - Details \_\_\_\_\_

I authorize the investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of lay wages and salary, be terminated at any time without any previous notice.

\_\_\_\_\_ (date) \_\_\_\_\_ (signature)