



**CITY OF JEFFERSON**  
317 South Main Street  
Jefferson, WI 53549  
Phone: (920) 674-7700

*We're going outside.*

**Position Information**

Position Applying for: \_\_\_\_\_

Department: \_\_\_\_\_

Employment Type:

Full-Time       Part-Time       Seasonal

Date Available to Start: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Personal Information**

Full Legal Name: \_\_\_\_\_

Other Names Used (if applicable for records verification):  
\_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Education & Training**

**High School / GED**

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

City/State: \_\_\_\_\_

Diploma       GED       Neither

Graduation Year (if applicable): \_\_\_\_\_

**Post-Secondary Education**

Institution: \_\_\_\_\_

City/State: \_\_\_\_\_

From: \_\_\_\_ / \_\_\_\_      To: \_\_\_\_ / \_\_\_\_

Degree / Major: \_\_\_\_\_

Degree Completed       In Progress       Did Not Complete

(Attach additional pages if necessary.)

**Licenses & Certifications**

List job-related licenses, certifications, registrations, or professional credentials:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you possess a valid Wisconsin driver's license (if required for the position)?

Yes       No       Not Applicable

(License verification may be required after conditional offer.)

**Employment History**

(List more recent employer first. Attach additional pages if needed.)

Employer's Name: \_\_\_\_\_

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

Supervisor Name & Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Position Title: \_\_\_\_\_

Employment Dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Primary Duties and Responsibilities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Annual Salary/Wages: \_\_\_\_\_

May we contact this employer?

YES     NO

## Employment History

Employer's Name: \_\_\_\_\_

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

Supervisor Name & Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Position Title: \_\_\_\_\_

Employment Dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Primary Duties and Responsibilities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Annual Salary/Wages: \_\_\_\_\_

May we contact this employer?

YES     NO

## Employment History

Employer's Name: \_\_\_\_\_

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

Supervisor Name & Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Position Title: \_\_\_\_\_

Employment Dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Primary Duties and Responsibilities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Annual Salary/Wages: \_\_\_\_\_

May we contact this employer?

YES     NO

**Military Service**

Branch of Service: \_\_\_\_\_

Served: From \_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_

Active Duty     Reserve

Highest Grade: \_\_\_\_\_

Skill/Specialty or Primary Duty: \_\_\_\_\_

**Relatives Employed by the City**

List any immediate family members employed by the City of Jefferson:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Reference #1**

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

Title /Relationship: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Number of Years Known: \_\_\_\_\_

**Reference #2**

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

Title /Relationship: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Number of Years Known: \_\_\_\_\_

**Reference #3**

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

Title /Relationship: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Number of Years Known: \_\_\_\_\_

**Supplementary**

Are you legally authorized to work in the United States?

Yes  No

(Proof of eligibility will be required upon hire.)

Have you ever been convicted of a felony?

Yes  No

(If yes, please attach a separate sheet giving full information.)

Have you previously been employed by the City of Jefferson?

Yes  No

If yes, list position(s) and date(s) of employment:

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**Applicant Certification**

I certify that the information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that misrepresentation or omission of material facts may result in disqualification or termination of employment.

Unless otherwise covered by collective bargaining agreement or written contract, employment with the City of Jefferson is at-will.

Signature: \_\_\_\_\_

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

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_