



W6833 INDUSTRIAL BLVD, ONALASKA, WI 54650

EMPLOYMENT APPLICATION

PHONE: (608) 783-6727 FAX: (608) 783-6743

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

Name LAST FIRST MI Date of Application

Address City State Zip

Telephone Email Address

1. GENERAL INFORMATION:

Are you able to perform the essential job functions of the position for which you are applying with or without a reasonable accomodation? [] No [] Yes

Have you been convicted of any felonies other than minor traffice violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position you are applying for.) [] No [] Yes

If Yes, explain:

2. EDUCATION & TRAINING:

Circle last grade completed - Grade 8 9 10 11 12 College 1 2 3 4 Masters Doctorate

Table with 5 columns: EDUCATION, NAME & LOCATION OF SCHOOL, NO OF YEARS ATTENDED, DID YOU GRADUATE?, SUBJECTS STUDIED. Rows include HIGH SCHOOL, COLLEGE, and TRADE, BUSINESS OR CORRESPONDENCE SCHOOL.

List any scholarships, academic honors, awards or special achievements:

3. SKILLS Please list any skills you have that are appropriate for the position you are applying for:

If required, will you work? Overtime [] Yes [] No Saturdays [] Yes [] No

Position applying for: Salary Requirements: \$ per hour

State fully why you believe you are qualified for this position

INTERESTS/ACCOMPLISHMENTS: You may wish to list significant experience, interest & accomplishments gained while working as a volunteer or has a hobbyist that may be useful in the position you are seeking. Names or organizations designating religion, race, etc. need not be mentioned.

Date you can start

EMPLOYMENT HISTORY

Starting with your PRESENT or MOST RECENT EMPLOYER, list in consecutive order ALL EMPLOYMENT for at least the past FOUR employers. If currently employed, may we contact your employer? Yes No

PRESENT OR MOST RECENT EMPLOYER

FULL NAME OF COMPANY		TELEPHONE		SALARY BEGIN END		EMPLOYED FROM TO MO/YR MO/YR	
STREET ADDRESS		CITY	STATE	ZIP			
NAME & TITLE OF SUPERVISOR		TITLE OF YOUR POSITION		REASON FOR LEAVING:			
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY:							
FULL NAME OF COMPANY		TELEPHONE		SALARY BEGIN END		EMPLOYED FROM TO MO/YR MO/YR	
STREET ADDRESS		CITY	STATE	ZIP			
NAME & TITLE OF SUPERVISOR		TITLE OF YOUR POSITION		REASON FOR LEAVING:			
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NAME & TITLE OF SUPERVISOR		TITLE OF YOUR POSITION		REASON FOR LEAVING:			
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READ CAREFULLY: I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

Signature _____ Date _____