

# Employment Application



400 Interpane Lane  
Deerfield, WI 53531  
Phone: 608-764-8661

We consider applicants for all positions without regard to race, color, religion, gender, sexual orientation, gender identity, nation origin, age, disability, genetic information, marital status, veteran status or any other status protected by applicable law.

**Please Print**

You must complete entire application and sign where indicated.

Date:

Name (first, middle, last)			
Address (street, city, state, zip code)			Mobile Telephone ( )-
Email Address:			Home Telephone ( )-
Are there other names under which you have worked or attended school? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list for reference checking purposes.			
Are you legally authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No (If hired, you will be required to provide proof of work authorization.)			
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.			
Do any of your friends or relative, other than spouse, work here? If Yes, state name and relationship _____			
Have you ever applied at this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, when:		Have you ever worked at this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, when:	
<b>Position Applying For</b>	<b>Part-Time or Full-Time Desired</b>	<b>Salary Range</b>	<b>Shift Preference</b>
When can you start?			
How were you learn about our company?  <input type="checkbox"/> Agency <input type="checkbox"/> Website <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Social Media <input type="checkbox"/> School <input type="checkbox"/> Other			

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

### Education

School	Name & Location (city, state)	Number of Years Attended	Major subjects	Diploma or Degree Received
High				
College				
Graduate				
Other (specify)				

### Employment History (start with most recent; use separate sheet if necessary)

Name of Employer:	Employment Dates (month and year) From: _____ To: _____
Telephone ( ) -	Hourly Rate/Salary Starting: _____ Final _____
Address:	Name of Immediate Supervisor:
Description of Duties:	
Reason for Leaving:	
Name of Employer:	Employment Dates (month and year) From: _____ To: _____
Telephone ( ) -	Hourly Rate/Salary Starting: _____ Final _____
Address:	Name of Immediate Supervisor:
Description of Duties:	
Reason for Leaving:	
Name of Employer:	Employment Dates (month and year) From: _____ To: _____
Telephone ( ) -	Hourly Rate/Salary Starting: _____ Final _____
Address:	Name of Immediate Supervisor:
Description of Duties:	
Reason for Leaving:	

---

**Comments:** Include explanation for any gaps in employment:

---

---

**Special Skills/Additional Training**

Please describe any special job-related skills and qualifications acquired from employment, other education or volunteer experiences, etc. Do not include experiences which would indicate race, religion, sex, national origin, genetic information, disability or age or any other status protected by law or regulation.

---

---

---

---

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.  
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied. A review of the activities involved in such a job or occupation has been given.

**Additional Information**

Summarize special job-related skills and qualifications acquired from employment or other experience.

---

---

---

**Personal/Professional References**

Do not include family members or past supervisors

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

---

## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

**In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employers.**

---

Date

---

(Signature of Applicant)