

Town of Neenah Fire Department

APPLICATION FOR EMPLOYMENT

Federal and state law requires that all applications be considered without regard to race, color, sex, age, or national origin. We believe in and fully support equal employment opportunity and will fulfill our obligation to the fullest.

Name: _____
Last First M.I.

Present Address _____

Home Phone # _____ Work Phone # _____

Best time to reach me at home: _____

Are you over the age of 18? Yes No

Are you a United States citizen, or do you have an entry permit which allows you to work? Yes No

Do you have a: Valid Wisconsin drivers license? Yes No

Commercial drivers license? Yes No

License number: _____
(Driver license numbers are requested to verify validity)

Have you ever filed an application here before? Yes No

If yes, please give date: _____

If required by employer, will you undergo a pre-employment physical? Yes No

High School Attended _____

Are you a High School Graduate Yes No

If no, please indicate highest grade completed _____

College or Technical School Graduate Yes No

If no, please indicate number of years completed _____

List any additional education:

Describe any education or training you have had which you feel is relevant to the job(s) for which you are applying. Also include relevant licenses and/or certifications. Be specific.

List organizations to which you belong (or have belonged) and any job-related honors or awards you have received.

Describe your military service including branch or service, month/year served, type of duty, and skill specialty.

List all skills we should be aware of in considering you for employment (include use of office machines, machinery, equipment, etc.)

List your Employment history, beginning with your current or most recent employer.

Employer _____ Type of business _____

Address _____

Position held _____ Reason for leaving _____

Your duties/responsibilities _____

Supervisor's Name _____ Telephone # _____

Dates of employment: From _____ To _____

Employer _____ Type of business _____

Address _____

Position held _____ Reason for leaving _____

Your duties/responsibilities _____

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Employer _____ Type of business _____

Address _____

Position held _____ Reason for leaving _____

Your duties/responsibilities _____

Supervisor's Name _____ Telephone # _____

Dates of employment: From _____ To _____

Personal references:

Name _____

Phone # _____

Name _____

Phone # _____

Name _____

Phone # _____

Applicant Signature _____ **Date** ____/____/____

Please Return to: Town of Neenah Fire Dept.
 Attn: Fire Chief
 1600 Breezewood Lane
 Neenah, WI 54956