

APPLICATION FOR EMPLOYMENT

Position {s} Applied For: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
          { first}  { middle}  { last}

Address: \_\_\_\_\_ City: \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_  
          { current}

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ S. S. # \_\_\_\_\_

Birth date: \_\_\_\_\_ Check One: Male \_\_\_\_\_ Female \_\_\_\_\_

Current Employment: \_\_\_\_\_ Student: \_\_\_\_\_

If Student where at: \_\_\_\_\_ Grade \_\_\_\_\_

If under 18 can you furnish work permit ? \_\_\_\_\_ When can you start work : \_\_\_\_\_

If under 18 please list emergency contact numbers: \_\_\_\_\_

\_\_\_\_\_  
List any special skills and Qualifications you may have: \_\_\_\_\_

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

List three non-family References and please include phone numbers. \_\_\_\_\_

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

Do you have any medical or physical conditions that would limit your job performance for the position that you are applying for. Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, Please explain: \_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_

I authorize any Police Agency to Release to the Village and/or Town of Almond any criminal history that I may have. This authorization is in conjunction with my application for employment with the Village and Town of Almond:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_  
{ last}                                  { first}                                  {middle}

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

D.L. # \_\_\_\_\_ Birth date: \_\_\_\_\_

Alias: \_\_\_\_\_ Current Phone: \_\_\_\_\_

Return completed application to Village of Almond Municipal Center or  
Fax to 715-366-4558 or

Deliver in person to Dan Folan Village of Almond Maintenance Department; 1367 Elm St,  
Village of Almond.

Between the hours of 7:30an and 4:00 pm Monday thru Friday.