

(With Driver's Information)

EMPLOYMENT APPLICATION

CITY OF ST. FRANCIS
4235 SOUTH NICHOLSON AVE.
ST. FRANCIS, WI 53235
(414) 481-2300

POSITION APPLIED FOR:
NON SWORN PERSONNELL

NAME: _____ DATE OF BIRTH: _____
Last First Middle

ADDRESS: _____
No. Street City, State, Zip

PHONE: (____) _____ SOCIAL SECURITY NO.: _____

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses?
____ No ____ Yes. If yes, describe in full _____

Will you abide by the safety rules of the City? ____ No ____ Yes

Education: List all schools attended; elementary, high school, college, other:

Name & Address	Year From/To	Graduated Yes/No	Major

Describe any additional education, training or apprenticeships you had:

Work History: List in order, last or present employer first:

Dates of Employment	Name & Address of Employer & Supervisor	Rate of Pay Start/End	Type of Employment	Reason for Leaving

May we contact the employee listed above? If not, please indicate which should not be contacted:

