

Town of Troy
N8870 Briggs Street, East Troy, WI 53120

Application for Employment
(please print or type)

POSITION APPLYING FOR: _____

NAME: _____
(First, Middle I., Last)

ADDRESS: _____ (Include street address, if you use a P.O.

Box)

CITY: _____ STATE: _____ ZIP CODE: _____

DATE OF BIRTH: _____ PHONE: _____ E-MAIL ADDRESS: _____

(Required upon employment)

EDUCATION: *Please list high school and any other education or training.*

YEARS: _____ SCHOOL: _____ DEGREES/CERTIFICATES: _____

YEARS: _____ SCHOOL: _____ DEGREES/CERTIFICATES: _____

YEARS: _____ SCHOOL: _____ DEGREES/CERTIFICATES: _____

EMPLOYMENT HISTORY:

PRESENT EMPLOYER & PHONE: _____

EMPLOYER'S ADDRESS: _____

(Street, City, State, Zip)

JOB TITLE: _____ TIME WORKED THERE: _____ / _____ TO _____ / _____

REASON FOR LEAVING: _____

PREVIOUS EMPLOYER & PHONE: _____

EMPLOYER'S ADDRESS: _____

JOB TITLE: _____ TIME WORKED THERE: _____ / _____ TO _____ / _____

REASON FOR LEAVING: _____

DRIVING INFORMATION: *If the position you are applying for will involve driving Town of Troy-owned vehicles, please complete the following.*

DRIVER'S LICENSE #: _____ EXP. DATE: _____

ISSUING STATE: _____ TYPE OF LICENSE: _____

Number of driver's license violations in the past three years: _____

Has your license been suspended or revoked in the past three years: _____

PLEASE READ BEFORE SIGNING:

I certify that all information on this application, and any additional information submitted with this application, is true and correct. I further certify that I understand that false, incomplete, or misleading information may result in rejection of my application; or in the event of employment with the Town of Troy, my immediate dismissal. All information submitted is subject to possible investigation.

(Signature)

(Date)