

# City of Fond du Lac - Application for Employment

AN EQUAL OPPORTUNITY EMPLOYER

CITY HUMAN RESOURCES DEPARTMENT  
160 SOUTH MACY STREET  
POST OFFICE BOX 150  
FOND DU LAC, WI 54936-0150  
(920) 322-3624

## APPLICATION FOR EMPLOYMENT

This information is for official use only and will not be released to unauthorized persons nor will it be used to discriminate against any applicant.

**NOTICE:** Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable).  
Applications, which are incomplete or illegible, will not be considered. If space provided is insufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions.

### 1. POSITION APPLYING FOR

**LIBRARIAN – INFORMATION SERVICES**

### 2. APPLICANT INFORMATION

Name in Full (Last, First, Middle):

Present Address:

Permanent Address: (if different from above)

Home Phone:

Work Phone:

Other phone where you can be reached:

Are you at least 18 years of age?

Have you been known by a different name?

Date you would be available to begin employment?

If so, please indicate name:

If hired, can you verify employment eligibility to work in the U.S.?

Military Status:

Wage/Salary Desired:

If valid license required for this position, please provide Driver's License Number:

Do you possess a valid Commercial Driver's License?  
Please list endorsements:

State of Issue:

### 3. GENERAL INFORMATION

Has an employer ever discharged you? Yes  No

If yes, please explain:

Has the City of Fond Du Lac previously employed you?  
Yes  No

If yes, please provide approximate dates:

Will you also be working another job during the summer months? Yes  No

If Yes: What potential scheduling conflicts may arise with your other employer? Please list:

Do you have any evening or weekend activities that could interfere with extra hours? If yes, please list activities:

Please list Relatives (name and relationship) working at the City of Fond du Lac (include in-laws):

In case of emergency, please notify (name and phone number):

#### 4. EDUCATION

Name of School	Location	Dates		Course Pursued	Degree, Diploma, or Credits Earned
		From	To		
High School					
College					
Graduate School					
Other (specify)					

#### 5. APPRENTICESHIPS & SPECIALIZED TRAINING

Type:	City & State:	Date of Completion:
Type:	City & State:	Date of Completion:
Type:	City & State:	Date of Completion:

#### 6. PROFESSIONAL LICENSES/CERTIFICATES

Type:	Expires on:	Registration Number:
Type:	Expires on:	Registration Number:
Type:	Expires on:	Registration Number:

#### 7. REFERENCES

##### GIVE THREE REFERENCES (NOT RELATIVES, OR PRESENT EMPLOYER).

Name and occupation	No. Yrs. Acquainted	Phone number
Name and occupation	No. Yrs. Acquainted	Phone number
Name and occupation	No. Yrs. Acquainted	Phone number

## 8. EMPLOYMENT

Please begin with current or most recent employer.

List chronologically all employment, including summer or part-time employment. If unemployed for a period, indicate such and provide dates of unemployment. If you wish to furnish additional employment information, please attach sheets of this same size.

Name and Address of Employer	Dates	Position Name and Duties	Reason for Leaving
Name _____ Street _____ City, State _____ Telephone _____ Direct Supervisor _____	Dates From                      To  Full-time π                      Part-time π  Ending Salary :		
Name _____ Street _____ City, State _____ Telephone _____ Direct Supervisor _____	Dates From                      To  Full-time π                      Part-time π  Ending Salary :		
Name _____ Street _____ City, State _____ Telephone _____ Direct Supervisor _____	Dates From                      To  Full-time π                      Part-time π  Ending Salary :		
Name _____ Street _____ City, State _____ Telephone _____ Direct Supervisor _____	Dates From                      To  Full-time π                      Part-time π  Ending Salary :		
Name _____ Street _____ City, State _____ Telephone _____ Direct Supervisor _____	Dates From                      To  Full-time π                      Part-time π  Ending Salary :		

May we contact your previous and/or present employers? Yes π No π

If not, please explain: \_\_\_\_\_

## 9. COURT RECORD

Have you been convicted of a felony within the last 7 years?

Please provide details:

Do you have any criminal charges pending, other than minor traffic violations?

Please provide details:

*Convictions or pending criminal charges are not an automatic bar to employment, each case is considered on its merits.*

## 10. QUESTIONS

For question A, please provide a hand written response. If you require more space, please attach an additional page to this application. Responses should be no longer than 1-page.

A. Why have you chosen to apply for this position?

## 11. ORGANIZATION MEMBERSHIP

1. Have you ever organized or helped to organize or become a member of any organization or group of persons which, during the period of your membership or association, you knew was advocating or teaching that the government of the U.S. or any state or any political subdivision thereof should be overthrown or overturned by force, violence or any other unlawful means? If the answer to this is yes, explain fully.      π No      π Yes

Explanation:

2. If your answer to question 1 is yes, did you during the period of such membership or association have the specific intent to further the aims of such organization, association or group of persons to overthrow or overturn the government of the U.S. or any state or any political subdivision thereof by force, violence or any other unlawful means?      π No      π Yes

## 12. WAIVER

I understand that all appointments are probationary for a period during which I must demonstrate my fitness for continued employment. I further understand that any appointment tendered me will be contingent upon the results of a complete character and fitness investigation.

I hereby certify that all statements made in this application are true and I understand that any misstatements of facts will cause forfeiture on my part of all rights to employment with the City of Fond du Lac. I understand and agree that any offer of employment is contingent on satisfactorily passing a post offer physical, including a drug and alcohol screening.

The undersigned is the person named in the foregoing application; I have read and made a complete answer to each question; my answers in each instance are true and correct; contain no misrepresentations, omissions or falsifications, and are complete. I understand that if any of the information contained in any of the foregoing answers contains any misrepresentations or falsifications or if any material information has been omitted, the same shall be deemed and agreed to be sufficient cause for non-selection or dismissal if selection has occurred.

SIGNATURE OF APPLICANT

DATE

**CITY OF FOND DU LAC, WISCONSIN**

**AUTHORIZATION FOR RELEASE OF INFORMATION**

To Whom It May Concern:

I am an applicant with the City of Fond du Lac, Wisconsin. I realize that during the processing of my application, I will be investigated by personnel officers of the City.

I hereby empower an employee of the City of Fond du Lac or other authorized representative bearing this release, within two years of its date, to obtain information and records pertaining to me from any or all of the following sources:

1. Municipal, State or Federal law enforcement agencies
2. Selective Service System
3. Any banking institution
4. Any place of business (for purposes of obtaining employment data)
5. Any previous employer
6. Present employer
7. Any school, college, university or other educational institution
8. Credit rating bureau or institution maintaining individual credit rating files

I hereby release any Municipal, State, or Federal law enforcement agency, individual or institution, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it.

I understand that any information concerning my past will be considered in evaluating me as an applicant to the City of Fond du Lac, and that all information obtained by the City of Fond du Lac in conjunction with this investigation and this permission, is confidential and I have no right to examine it, as the people contacted will be advised that what they say will be held in confidence.

The only exception to this blanket authorization is any medical information in the possession of any source named above until subsequent to a conditional offer of employment (per Americans with Disabilities Act).

Exceptions to this blanket authorization:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
(Sign in presence of Notary Public)

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
(Print Legibly)

DATE OF BIRTH\*: \_\_\_\_\_  
\*for background investigation only

NOTARY:

\_\_\_\_\_

DATE: \_\_\_\_\_

MY COMMISSION EXPIRES ON: \_\_\_\_\_  
(Seal)

# City of Fond du Lac Equal Employment Opportunity Form

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Last Name, First Name, Middle

Position Applied for: \_\_\_\_\_

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

The information requested on this sheet regarding race, sex, age, and handicap status is needed to analyze and assure compliance with Federal Equal Employment Opportunity laws and to meet the reporting requirements of those laws. Your cooperation in voluntarily giving this information is important to the success of our equal employment opportunity program.

This Equal Employment Opportunity Form will be detached and kept separate from your application. It is not to be used in hiring or interviewing. It will be available only to authorized personnel for research and evaluation purposes. Refusing to provide this information will not subject you to adverse treatment. Please check the appropriate boxes below.

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SEX:  Male  Female OVER 40 YEARS OF AGE

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## RACE/ETHNIC IDENTIFICATION

- White (not of Hispanic Origin): All persons having origins in any of the peoples of Europe, North Africa, or the Middle East.
- Black (not of Hispanic Origin): All persons having origins in any of the black racial groups of Africa.
- Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central South American, or other Spanish cultures or origins, regardless of race.
- Asian or Pacific Islander: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.
- American Indian or Alaskan Native: All persons having origins in any of the original peoples of North American, and who maintain cultural affiliation through tribal affiliation or community recognition.

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## HANDICAPPED IDENTIFICATION

Do you consider yourself handicapped based on the definition that a "handicapped individual" is a person who: 1) has a physical or mental impairment which substantially limits one or more of his or her major life activities (e.g., communication, education or socialization); 2) has a record of such impairment (even though the person may be completely recovered); or 3) is regarded by others as having such an impairment. For purposes of this definition, a handicapped individual is "substantially limited" if he or she is likely to experience difficulty in securing, retaining, or advancing in employment because of a handicap.  Yes  No

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VETERAN STATUS:  Non-Veteran  Vietnam Era Veteran  Other Veteran

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## HOW DID YOU LEARN ABOUT THIS VACANCY?

- Fond du Lac Reporter
- Action Advertiser
- Job Service
- School or College Counselor or Other Official
- Present City Employee
- Friend or Relative
- Other (please specify) \_\_\_\_\_

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## THE CITY OF FOND DU LAC EQUAL EMPLOYMENT OPPORTUNITY POLICY

It is the official policy of the City of Fond du Lac to provide equal employment opportunities for all qualified and reasonably qualifiable persons without regard to race, color, religious or political beliefs, or affiliation, national origin, marital or parental status, pregnancy, sex, sexual orientation, age, handicap, or any other non-merit factors except where age, sex or physical requirements constitute a demonstrable bona fide occupational qualification. Arrest and conviction records shall not be considered in employment decisions except where permitted by law.

This policy is applicable to all aspects of employment including job structuring, classification, promotion, recruitment, selection, appointment and placement, testing, training, education, tuition assistance, layoff and recall, disciplinary action, termination, salary and benefits administration, and all other components of the City of Fond du Lac personnel system. In addition, harassment on the basis of sex, or any other protected status, shall be prohibited as a matter of official policy. The City of Fond du Lac will continue to comply with Federal and State regulations and will continue to work cooperatively with governmental and community organizations to insure equal employment and advancement opportunities.

In order to effectively implement this policy and directive, an annual affirmative action plan shall be developed by the Affirmative Action Officer. Such affirmative action plan shall be presented to the City Council for approval. After presentation to the City Council, copies of the Plan shall be distributed to all department heads and shall be made available to all employees.

Adopted in 1985 by the Fond du Lac City Council.