

APPLICATION FOR EMPLOYMENT

www.brillionwi.gov AN EQUAL OPPORTUNITY EMPLOYER

City of Brillion 201 N. Main Street Brillion, WI 54110 Phone: (920) 756-2250

Fax: (920) 756-2351

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, disabilities, sexual orientation or any other legally protected status. DATE.

DATE.				
Position You Are Applying For:				
☐ Full Time ☐ Part Time ☐ On-Call/Relief	f Hours	☐ Tem	porary/Li	mited Term Employment
P	ERSO	ANC	L	
Name: (Last) (First)		(N	1.1.)	Home Phone:
Address: (Street)		(A	pt #)	Business Phone:
71441000. (011001)		(7)	φτ")	May we contact you at this # ☐ Yes ☐ No
(City) (State)		(7	ip)	Social Security #:
(o.g)		(—		Cooler cooling in
List any other names you have been known by:				
,				
Are you legally eligible for employment in the United S	States?	☐ Yes	□ No	When will you be available for
If you are under 18 years of age, can you provide requestions of your eligibility to work?	uired	□ Vos		employment?
		☐ Yes	□ No	
Have you ever been employed by the City of Brillion? □ Yes □ No				
If yes; when, in what position, and in what department?				
Are you currently related to anyone employed by the	5.	illion?	u .	Yes □ No
If yes, please list names:			M	di a m
Do you possess a valid Driver's License?	☐ Yes	□ No		nber:
De version de la license de la				e Issued:
Do you possess a valid Commercial Driver's License?	Y U Yes	⊔ No		nber:
De very house and the transfer death in 100			Stat	e Issued:
Do you have access to a licensed vehicle?	\$4000 (Q190 (AF 941))	□ No		
Do you currently have a pending criminal charge agai misdemeanor or felony? ☐ Yes ☐ No If yes, pl			ave yo	u ever been convicted of a crime, either
NOTE: A conviction record or pending arrest record does not constitute an automatic bar to employment and will be considered only if there is a substantial relationship to the circumstances of the particular position or if the employer deems there is a bona fide occupational qualification inherent in the position which requires this information prior to hiring.				
Person to be notified in case of emergency:				
Name:			nip:	Telephone:
Address:				
			nip:	Telephone:

	EDL	JC#	ATION		
DID YOU GRADUATE FROM HIGH SCHOOL?	☐ Yes	\(\sigma\)	No Name/	Location o	f School:
If no, have you passed a high school equivalency or GED					e of Test:
TRAINING BEYOND HIGH SCHOOL: College			g, Business C	College, or	other schools you have attended.
College, University or School – Name and Location	Dates Atten (Month/Yea From		Presently Attending	Major Field	Type of Degree (If Rec'd)
			□ No		
			□ Yes □ No		
			□ Yes □ No		
Describe any education or training you have had which is inservice training. Please provide dates.	not covered a	bove;	such as voca	tional scho	ool, correspondence courses, service schools,
SPECIAL S This information must be List computer programs you are familiar with: Other computer skills (e.g.: internet, desktop publishing): Describe here to what extent your training and experience you are applying.	provided if yo	ou are	applying for a	position re	equiring these skills.
List any Memberships in Professional or Technical Assoc	iations:		Current Lice	nse or Reç	gistration as a member of a trade or profession:
List persons who are familiar with your qualifications Individuals must be respons	and backgrour	nd. (N	ENCES of relatives of	r present e	mployers, fellow employees or school teachers.) for at least three years.
Name		Teleph	, .	ŕ	Nature of Relationship
1.					
2.					
3.					

Name of Employer:	Phone:	Dates of Employment::
Name of Employer:	Priorie.	1
		From To
Address:		Supervisor:
Reason for Leaving or Considering Change:		Job Title:
<u> </u>		
☐ Full Time ☐ Part Time	Beginning Pay:	Ending Pay:
(hours per)	\$ per	\$ per
Description/Duties:		
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Name of Employer:	Phone:	Dates of Employment::
		From To
Address:		Supervisor:
Reason for Leaving or Considering Change:		Job Title:
☐ Full Time ☐ Part Time	Beginning Pay:	Ending Pay:
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(hours per)	\$ per	\$per
Description/Duties:		
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☐ Full Time ☐ Part Time	Beginning Pay:	Ending Pay:
(hours per)	\$per	\$per
Description/Duties:		
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GENERAL INFORMATION

If there is any additional information not requested which you believe relevant to your ability to perform the duties and responsibilities for the position you are applying for, you may provide this information for consideration. (Attach additional sheet if necessary.)

APPLICANT'S AUTHORIZATION AND ACKNOWLEDGMENT

I certify that the information provided on this application (and accompanying resume, if any) is true, correct and complete to the best of my knowledge without omissions of any kind. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize persons, schools, my current employer (if applicable) and previous employers and organizations named in this application (and accompanying resume, if any) to provide any relevant information to the City of Brillion that may be required to enable the City of Brillion to arrive at an employment decision.

I understand that I may be required to submit to a pre-employment physical examination, including substance abuse screening, prior to appointment. I agree that the results of such examinations and screening may be released to the City of Brillion only for consideration of my employment.

I consent freely and voluntarily to participate in required drug tests and/or pre-employment physical examination.

I understand that I may be fingerprinted and a criminal record check made of local, state or federal authorities and that a conviction is not an automatic

bar to my employment.	
	which I must demonstrate my fitness for continued employment. I further on the results of additional testing, a complete background check, and fitness
Signature of Applicant:	Date:
applicant. If you desire for your employment application and all related Wisconsin Statutes, you must provide written request for confidentiality.	ants must be revealed unless a request for confidentiality is received from the references and documents to remain confidential to the extent allowed by If no written request is received from applicants, the applicants' names must be ames of the finalist considered for employment, they be provided to those
OPTIONAL: I request that my employment application and all related re Statutes since they would tend to reveal my identity.	eferences and documents remain confidential to the extent allowed by Wisconsin

Date:

DMW/HMZ Rev. 5/02 (4/23 updated logo, website)

Signature of Applicant:

AFFIRMATIVE ACTION / EQUAL EMPLO	YMENT OPPORTUNITY DATA	
The following information will be used only for research and reporting purposes for the City of Brillion and the Federal Government in accordance with applicable laws and regulations. This information is voluntary and there will be no adverse consequences for not responding. This information is confidential and is kept separate from this application. It will not be a consideration for employment.		
Sex: Male Female	Birthdate:	
Ethnic Origin: American Indian/Alaskan Native Black/African American (Not of Hispanic origin) White/Caucasion/European/North African/Middle Eastern or Indian Subcontinent Hispanic/Chicano/Puerto Rican/Mexican/Cuban/Central or South American Asian American/Pacific Islander/Far Eastern or Southeastern Asian (ie., China, Japan, Korea, Philippine Islands, Samoa)	Veteran Status: ☐ Non Veteran ☐ Veteran ☐ Disabled Veteran (Disability less than 30%) ☐ Special Disabled Veteran (Disability 30% or greater)	
The Americans with Disabilities Act (ADA) defines an individual with a disability as "one who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or who is regarded as having such an impairment."		
Based on this definition, are you an individual with a disability?	☐ Yes ☐ No	
The City of Brillion is committed to the equality of opportunity for all people. It is the policy of the City of Brillion to provide equal employment opportunities for all individuals, on the basis of their skills, abilities and qualifications, without regard to race, color, national origin, religion, political affiliation, sex, age, disability, marital status, arrest or conviction record, sexual orientation, disabled veteran or covered veteran status, membership in the National Guard or any other reserve component of the United States or State military forces, use or nonuse of lawful products off the employer's premises during non-working hours, or any other non-merit factors, except where such factors constitute a bona fide occupational qualification.		
How did you learn of this position? Newspaper: Employee Walk-In Employment Agency Job Line Internet Internal Posting Other:		

Brillion Fire Department New Member Information

The following list contains some of the requirements for membership in the Brillion Fire Dept. This list is intended as an informative guide for new applicants and is not complete.

- Members must be must live within the fire district covered by the Brillion Fire Department.
- Members must be 18 years of age and hold a high school diploma or equivalency there of.
- Members must pass a physical given by the city physician.
- Members are subject to a twelve (12) month probation period during which they may be dismissed for any reason.
- Members must attend at least six (6) regular meetings in any twelve (12) month period, and must not miss more than three (3) consecutive meetings without an excuse. Subject to dismissal.
- Members must attend monthly drills and other extra training. Absence at more than three (3) regular drills within a twelve (12) month period is subject to dismissal.
- New members must possess a valid drivers license.
- New members will be given the opportunity and must successfully complete Firefighter I certification (96 hrs.) within twenty four (24) months of joining.
- Due to training regulations and restrictions, beards for new members are prohibited. (COM 30.12(6)).
- Members must be able to work from ladders and at varying heights which could be considerably above ground level.
- Members must be able to work in confined spaces and with self contained breathing apparatus.
- Dues for membership are as currently posted in the bylaws and are payable at each regular meeting.
- Members Shall perform such other duties as may, from time to time, be required by the City and/or Brillion Fire Department.

I, have	read and understand the above.
Signed	Date