

WINNEBAGO COUNTY APPLICATION FOR EMPLOYMENT

Department of Human Resources
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Winnebago County does not discriminate in regard to race, color, religious or political beliefs or affiliation, national origin, marital or parental status, pregnancy, sex, sexual orientation, age, disability or any other nonmerit factors except where age, sex or physical requirements constitute a demonstrable bona fide occupational qualification. If you need assistance in reading or completing this application, please contact any representative of the Human Resources Department. **Failure to complete all parts of this application may constitute grounds for your disqualification as an applicant for a position.**

			Date
Position(s) Desired (Title or Job Code)			
(See AA/EEO Supplemental Form Insert)			
Name			
Last	First	Middle	
Current Address			
Street/Number		City/State	Zip Code
Permanent Address (if different from above)			
Cell Phone ()		Home Phone ()	Daytime Phone ()
Are you at least 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>			E-mail address
Have you previously been employed by Winnebago County? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, was employment under a different name? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, what was it? What dates? thru	

EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION	GRADUATED		DEGREE AND DATE	FIELD OF MAJOR STUDY
		YES	NO		
High		<input type="checkbox"/>	<input type="checkbox"/>		
Tech		<input type="checkbox"/>	<input type="checkbox"/>		
College		<input type="checkbox"/>	<input type="checkbox"/>		
Other		<input type="checkbox"/>	<input type="checkbox"/>		

List all convictions (including those received before your 18th birthday that were handled as adult offenses) with corresponding dates that you have received for all violations of law (including traffic incidents/offenses):

NOTE: The existence of an arrest and/or conviction record does not constitute an automatic bar to employment.

Employment History

*Begin with current or most recent job, then list each previous employer in order. **All boxes must be completed.**

Dates Employed		Employer's Name/Address/Phone	Supervisor/Phone	Your Job Title
From (Mo/Yr)	To (Mo/Yr)			
Status Part-time <input type="checkbox"/> Full – time <input type="checkbox"/>	Wage/Salary	Job Duties		Reason for Leaving
From (Mo/Yr)	To (Mo/Yr)			
Status Part-time <input type="checkbox"/> Full – time <input type="checkbox"/>	Wage/Salary	Job Duties		Reason for Leaving
From (Mo/Yr)	To (Mo/Yr)			
Status Part-time <input type="checkbox"/> Full – time <input type="checkbox"/>	Wage/Salary	Job Duties		Reason for Leaving
From (Mo/Yr)	To (Mo/Yr)			
Status Part-time <input type="checkbox"/> Full – time <input type="checkbox"/>	Wage/Salary	Job Duties		Reason for Leaving
From (Mo/Yr)	To (Mo/Yr)			
Status Part-time <input type="checkbox"/> Full – time <input type="checkbox"/>	Wage/Salary	Job Duties		Reason for Leaving

Please use a separate sheet of paper for additional employers.

*If currently employed, may we contact that employer? Yes No

References

Work or education-related (former employers, supervisors, co-workers, school, faculty.) No relatives/significant others.

Name/Telephone/Address	Occupation	Nature of Relationship

From what source did you find out about Winnebago County employment opportunities? _____

SECTION A – SPECIALIZED CLERICAL SKILLS

Words per minute: Typing: Speedwriting/Shorthand: When where you last tested?

By whom?

Computer skills (List all software programs familiar with):

List office machines or other equipment which you operate skillfully (e.g., Dictaphone, 10 key calculator):

SECTION B – VEHICLE ACCESS AND EXPERIENCE

Do you have access to a vehicle? Yes No Do you have a valid drivers license? Yes No

If you are applying for a job where you need to drive your car while on County business, can you make arrangements to meet the County's minimum liability insurance requirements on your vehicle (\$100,000 each person bodily injury; \$300,000 each accident bodily injury; \$50,000 property damage liability)? Yes No

If you are applying for a job involving truck driving or operating heavy equipment do you have a current Commercial Driver's License? Yes No If yes, which class(es) and/or endorsement(s)?

Check the types of equipment that you are qualified to operate:

- | | | | |
|--|---|---|------------------------------------|
| <input type="checkbox"/> Dump truck | <input type="checkbox"/> Tandem truck | <input type="checkbox"/> Skid steer | <input type="checkbox"/> Chain saw |
| <input type="checkbox"/> Pick-up truck | <input type="checkbox"/> Riding mower | <input type="checkbox"/> Tractor | <input type="checkbox"/> Fork lift |
| <input type="checkbox"/> Grader | <input type="checkbox"/> Dozer/Crawler | <input type="checkbox"/> Backhoe | <input type="checkbox"/> Welder |
| <input type="checkbox"/> Scraper | <input type="checkbox"/> Snow plow | <input type="checkbox"/> Large/small roller | |
| <input type="checkbox"/> Bus | <input type="checkbox"/> Front end loader | <input type="checkbox"/> Articulated loader | |

Others (please list)

SECTION C -- LICENSING REQUIREMENTS

If you are applying for a position that requires a license or registration with the State (Nursing, COTA, Physician, Attorney, Electrician, Social Worker, etc.), is your license or registration current? Yes No

If yes, license title and current registration/number

SECTION D – ADDITIONAL INFORMATION

List additional skills acquired, honors, achievements, professional or trade organizations which you feel will be of importance in your work:

Are you related to any county employee or elected official? Yes No

If yes, please explain:

Name:

Relationship:

Department:

Have you ever been warned/disciplined for any of the following conditions in your previous or current employment?

Attendance Yes No | Performance Problems Yes No | Inability to get along with others Yes No

Have you ever been suspended or discharged from any position? Yes No

Do you have any gaps in employment in excess of 30 days? Yes No

If yes, please explain (including dates and circumstances)

Information above this line will not be sent to references or employers.

PLEASE READ CAREFULLY BEFORE SIGNING
Employment Application Affidavit/Information Release

I hereby certify that all statements made on or in connection with this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that any misstatements, false information, or omissions of material fact herein subject me to disqualification or dismissal. I further understand that my classification as a regular employee depends upon successfully performing work assigned to me during a probationary period, where applicable. I also understand that regular attendance is required of me as a condition of continued employment.

I understand and agree that all information furnished in this application may be verified by Winnebago County. I also understand that any employment is subject to a satisfactory check of references and satisfactory results of a background check, drug screen, and any other required examinations.

I understand that Winnebago County may conduct a check on my background to verify the information I have furnished in my application for employment, which may include, but not be limited to, information from previous employers, references, school records, driving records, and any criminal records.

I understand that under Wisconsin law, employment applications are considered to be open public records. However, a provision of that law, Section 19.36 (7) (b), Statutes, allows an applicant to request in writing that his or her application not be open to the public. If such a request is made, an application will then normally only be open to public review, in spite of such a request, if a person becomes a "final candidate" for a position. A "final candidate" for the position is defined as being one of the five most qualified applicants for the position or all of the applicants for the position if five or less persons submit applications. If you become a final candidate for a position, your application will become an open record regardless of any request you have previously made for confidentiality.

I hereby voluntarily and knowingly authorize and request any current or former employer, educational institution, law enforcement agency, or other persons or organizations having personal knowledge about me to furnish Winnebago County with any and all information in their possession regarding me, in connection with an application for or retention of employment. Further, I hereby release from liability or responsibility all persons, companies and corporations supplying such information. Copies of this document will be considered as valid as an original thereof.

NAME (Print) _____ **DATE** _____

SIGNATURE _____

Submission of this form by electronic means constitutes certification and a signature. I understand that, if selected to participate in an interview and/or testing process, I will be required to sign this application.

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with Winnebago County will be based only on your merit and fitness and on no other consideration. Please note that one application is sufficient regardless of the number of positions for which you are applying. Your application will remain active for six (6) months from the date that you apply. This application was approved by the Winnebago County Affirmative Action Commission through an approved Affirmative Action Plan. Hiring is contingent on the successful completion of a pre-employment drug test.

WINNEBAGO COUNTY APPLICATION FOR EMPLOYMENT

Affirmative Action/EEO Supplemental Form

Name: _____

Date: _____

NOTE: Winnebago County has adopted an Affirmative Action Plan. In an attempt to judge the effectiveness of our recruitment efforts, we request that you provide the following information. This information will not be used in hiring or in any other employment decision. **Participation in providing this information is entirely voluntary.**

Date of Birth: _____ (month) _____ (date) _____ (year) Sex: Male Female

How do you describe yourself in the following terms? Please check one.

- White/Caucasian Oriental/Asian American Hispanic/Spanish Surnamed
 Black/African American American Indian/Native American Other

Are you able to perform the essential functions of the job for which you are applying? Yes No

If no, please explain

JOB GROUP/APPLICATION CODE SYSTEM – Use a code(s) for position(s) desired on front page

A	ADMINISTRATIVE POSITIONS (State Title)	SL	SKILLED LABOR
P	PROFESSIONAL POSITIONS (College or Technical Degree)		SL1 Equipment Operator
	P1 Legal		SL2 Mechanic
	P2 RN/LPN		SL3 Janitor Watchman
	P3 Financial/Accounting		SL4 Electrician/HVAC/Plumber
	P4A Social Worker (BA or BSW)	GL	SL5 Carpenter/Painter
	P4B Social Worker (Masters)		GL1 Custodian
	P5 Other (State Title)		GL2 Maintenance
S	SECRETARIAL	T	TECHNICAL
	S1 Secretary		T1 Conservation Technician
	S2 Legal Secretary/Judicial Assistant		T2 Engineering Technician
C	CLERICAL		T3 Computer-related (State Title)
	C1 Clerk		T4 Other (State Title)
	C2 Account Clerk	SP	HUMAN SERVICES/PARA-PROFESSIONAL
	C3 Clerk/Receptionist		SP1 Program Specialist
	C4 Word Processing Operator/Transcriptionist		SP2 Family Case Manager
	C5 Records Clerk/Data Entry Clerk		SP3 Home Health Aide
	C6 Support Specialist		SP4 Mental Health Technician
	C7 Child Support Specialist		SP5 Other (State Title)
	C8 Public Health Aide		
LE	LAW ENFORCEMENT	PVHC	PARK VIEW HEALTH CENTER
	LE1 Corrections Officer		PV1 Nurse Aide
	LE2 Dispatcher		PV2 RN/L.P.N.
	LE3 Master Control/Booking/Property Record Clerk		PV3 Food Service Worker
	LE4 Reserve Officer		PV4 Room Attendant/Custodian
	LE5 Patrol Officer		PV5 Other (State Title)
SEAS	SEASONAL POSITIONS		TEMPORARY POSITIONS
	SEAS1 Laborer		TEMP1 Clerk
	SEAS2 Beach Staff		TEMP2 Account Clerk
	SEAS3 Lifeguard		TEMP3 Clerk/Typist
	BT Bridgetender		TEMP4 Secretary
			TEMP5 Word Processing Op/Transcriptionist
			TEMP6 Clerk/Receptionist
			TEMP7 Family Case Manager
			TEMP8 Human Services Aide
			TEMP9 Social Worker
			TEMP10 Custodian