

VILLAGE OF COCHRANE
102 E 5th St; PO Box 222
Cochrane, WI 54622

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name (Last, First, Middle)	Telephone Number
Address	E-mail Address
City/State/Zip	

Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you Applying For: <input type="checkbox"/> F/T <input type="checkbox"/> P/T <input type="checkbox"/> Temp <input type="checkbox"/> PERM	Are you able to work nights and weekends when required for the job? <input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY - Begin with Most Recent Employment

Dates From To	Company Name	City, State
Titles and Duties		
Reason for Leaving:		Contact Name/Number
Dates From To	Company Name	City, State
Titles and Duties		
Reason for Leaving:		Contact Name/Number
Dates From To	Company Name	City, State
Titles and Duties		
Reason for Leaving:		Contact Name/Number
Dates From To	Company Name	City, State
Titles and Duties		
Reason for Leaving:		Contact Name/Number

EDUCATION/TRAINING - Include Technical/Academic Achievements/Courses

	Diploma/Degree	Year achieved
High School		
College/University		
Business/Technical		
Other		

Military Service Yes No Branch

PROFESSIONAL & TECHNICAL INFORMATION

Certification/License	Expiration Date	Number/Grade
Water Operator's License		
Waste Water Operator's License		
Other		
Other		
CDL		

OTHER SPECIAL SKILLS - List other specific skill you have to offer for the Job

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REFERENCES - Professional and Personal

Name	Address	Phone