

Position desired:

ALGOMA UTILITIES

People you know. Service you trust, since 1904. 1407 Flora Avenue ♦ Algoma, WI 54201 ♦ (920) 487-5556 www.algomautilities.com

APPLICATION FOR EMPLOYMENT

The Algoma Utility Commission is an Equal Employment Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, material or veteran status, or any other legally protected status. Applicants requiring reasonable accommodation to the application and/or interview process should notify us immediately. Please understand that the Utility will only accept applications for currently advertised positions.

Date of Application:

How did you learn of this vacancy	y?:		_ Date availabl	e for emp	loymen	t:
	General Inf	formation				
Last Name		First Name			1	Middle Initial
Street Address	P.O Box	City	Sta	te	Zi	ip
Home Phone	Work Phone	Message Phone		E-mail A	ddress	
					(Please	e Circle One)
If you are under 18 years of ag	e, can you provide proo	of of your eligibilit	ty to work?	N/A	Yes	No
Have you previously applied for If yes, Position and Date					Yes	No
Have you previously been emp If yes, Position and Date	ployed by the Algoma U	tility Commission	ı?		Yes	No
Do you know anyone who is enterest. If yes, Name and Relation		•			Yes	No
Are you legally authorized to b	become employed in the	United States?			Yes	No
Are you currently employed? If yes, may we contact y	our current employer?				Yes Yes	No No
What is your Driver's License	# and State?					
Have you been convicted of a If yes, please explain:					Yes	No

The Utility, in making hiring decisions, will consider criminal convictions and how a conviction relates to the position you are applying for. A criminal conviction will not automatically bar you from employment.

Does the salary for this position meet your requirements?				Yes	No		
Can you travel overnight if requir	red?					Yes	No
Are you available to work occasion	onal evenings	and/or w	eekends	if required?		Yes	No
	TP.	ducation	and Tra	ining			
				ınınıg			
Did you graduate from high school or receiv			□ Yes				
Name of college, university or Major Da vocational school			Attended Full Years Completed		Degrees Conferred		Credit Hours
Vocational school		From	То	Completed	Title	Date	Hours
Indicate any professional cartificates or licenses	agas you passage th	not are related	to this pos	ition:			
Indicate any professional certificates or licer	nses you possess u	nat are related	to this pos	ition:			
]	Employm	ent His	tory			
Start with present or last job and	work back. I	Be sure to	include 1	the experience	which you fee	l qualifies	you for this
position. Include military service, v	olunteer servi	ce or other	unpaid e	xperience. Failu	re to complete	this section	n may affect
your being considered for an inte						UT NOT S	SUPPLANT
COMPLETION OF THE FOLLOW	VING INFORM	MATION.	Please us	e a separate she	et if needed.		
Employed by:			Your Jo	b Title:			
Address:			Your Du	ıties:			
Employed From (Mo. / Yr.)	To (Mo. / Yr.)						
Supervisor's Name	Phone No.						
Supervisor's Title							
Starting Salary \$	Final \$						
Number of Hours Worked Per Week							
Number of Employees Supervised							
Reason for Leaving							
May We Contact This Employer	□ Yes						
Employed by:			Your Jo	b Title:			
Address:			Your Du	ıties:			
Employed From (Mo. / Yr.)	To (Mo. / Yr.)						
Supervisor's Name	Phone No.						
Supervisor's Title							
Starting Salary \$	Final \$						
Number of Hours Worked Per Week							
Number of Employees Supervised							
Reason for Leaving							
May We Contact This Employer ☐ No	□ Yes						

	Employment Hi	istory - Continued	
Employed by:		Your Job Title:	
Address:		Your Duties:	
Employed From (Mo. / Yr.)	To (Mo. / Yr.)		
Supervisor's Name	Phone No.		
Supervisor's Title			
Starting Salary \$	Final \$		
Number of Hours Worked Per Week			
Number of Employees Supervised			
Reason for Leaving			
May We Contact This Employer □ No	☐ Yes		
Employed by:		Your Job Title:	
Address:		Your Duties:	
Employed From (Mo. / Yr.)	To (Mo. / Yr.)		
Supervisor's Name	Phone No.		
Supervisor's Title			
Starting Salary \$	Final \$		
Number of Hours Worked Per Week			
Number of Employees Supervised			
Reason for Leaving			
May We Contact This Employer □ No	□ Yes		
	Additional	Qualifications	
Disease grammonings visus additional abilla on a			eviament energian.
Please summarize your additional skills or q	uamications related to this pos	ition, including computer and ed	Jurpment operation:
	Additional	l Information	
Anything else you would like us to consider a	relating to your ability to perfo	rm the job for which you have a	applied?
	D 6 -	ID C	
		al References	
			essional qualifications and character.
Name	Position ar	nd Employer	Phone Number

ALGOMA UTILITY COMMISSION – AFFIDAVIT/CERTIFICATION OF INFORMATION AND RELEASE

By my signature below:

I certify that to the best of my knowledge the information contained in this application and all supplemental information I have submitted is true and complete. I understand that my employment may be denied or terminated if I provide false, misleading, or incomplete information during the hiring process or during my employment, regardless of when or how discovered.

I certify that I have read the job description for the position for which I am applying and that I can perform the essential and auxiliary functions listed for this position with or without reasonable accommodation, and I understand that the job description is illustrative only and does not list all functions or responsibilities of the position.

I understand that this application is valid only for this position and I must re-apply for any future positions with the Algoma Utility Commission.

I understand that if I am hired I must produce applicable documents showing that I am lawfully authorized to work in the United States, in accordance with the Immigration Reform and Control Act of 1986, as amended.

I understand and agree that the Utility may contact my current and prior employers, educational institutions, and other references, whether listed or not listed in my application material. These references are authorized to give the Utility any and all pertinent information they may have related to my previous job performance and my ability to perform the job I am applying for, this includes information relating to my moral character. I release all persons or entities involved, including the Algoma Utility Commission, previous employers and their agents, and any other person or entity, from all liability arising from this contact and release of information. (You will be informed prior to the Utility contacting references and present or past employers.)

I agree to submit to any post-offer, pre-employment, medical or physical testing, as required by the Algoma Utility Commission.

I authorize the Utility to conduct a criminal history and credit check and understand that the Utility in making hiring decisions will consider criminal convictions and how a conviction relates to the position I am applying for. I understand that a criminal conviction does not automatically bar me from employment with the Utility. (You will be notified prior to the background check and if a credit check is required you will be notified of your rights under the Fair Credit Reporting Act.)

I understand and agree that nothing contained in this employment application packet creates a contract for employment between the Utility and me. If an employment relationship is established, I understand that unless specifically limited in an expressed, formal executed contract, I have the right to terminate my employment at any time and that the Utility has the same right.

Applicant Signature	Date	
Applicant Name - Printed		