

**Town of Madison  
Notice of Drug Testing Policy**

All job applicants are hereby given due notice that they will be required to undergo a drug test upon an offer of employment and prior to their final appointment in conformance with Article V. Section 8.0 of the Town Personnel Ordinance entitled "Applicant and Employee Drug Testing Policy for the Town of Madison."

**APPLICATION FOR EMPLOYMENT**

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to credit data. **This list, however, is not exhaustive of the grounds on which discrimination is prohibited.**

(Please Print)

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Social Security No. \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_  
No. Street City State Zip

Are you legally eligible for employment in the U.S.A.? Yes \_\_\_ No \_\_\_ If hired, you must submit proof of your eligibility to work in the U.S.A.

Are you over the age of eighteen (18)? Yes \_\_\_ No \_\_\_ If no, hire is subject to verification that you are of minimum legal age.

Position(s) applied for \_\_\_\_\_

Were you previously employed by us? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

On what date will you be available for work? \_\_\_\_\_

List any job related experiences, skills, or qualifications which will be a benefit in the job for which you are applying? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of a felony? Yes \_\_\_ No \_\_\_.

If yes, please give the conviction date and nature of the offense.

\_\_\_\_\_

## EMPLOYMENT HISTORY

**Beginning with most recent.**

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone -								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone -								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone -								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone -								

I hereby give permission to contact the employers listed above concerning my work experience.

Signed \_\_\_\_\_

## EDUCATIONAL HISTORY

School	Name and Address of School	Course of Study	Last Year Completed	Did you Graduate?	List Diploma or Degree
Elementary					
High					
College					
Other (Specify)					

**PERSONAL REFERENCES**

(Do not use former employers or relatives)

Name and Occupation	Address	Phone Number

Please indicate the best time and phone number to reach you for follow up on this application:

\_\_\_\_\_

PLEASE READ AND SIGN

The facts set forth in my application are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the Town of Madison in any way if the Town of Madison decides to employ me. I understand and agree that my employment is subject to the rules and provisions of the Town of Madison's personnel ordinance. An individual appointed to a regular position shall serve a probationary period of six months, and may be dismissed by the town manager at any time it is determined the employee is not satisfactorily performing the assigned duties and performance is not likely to improve. No one other than an officer of the Town of Madison has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer.

\_\_\_\_\_  
Signature of Applicant

**FOR OFFICE USE ONLY**

Interviewer	Date	Comments

Tests Administered	Date	Raw Score	Rating	Comments and Interpretation

**REFERENCE CHECK of FORMER EMPLOYERS**

Employer	Name and Position of Person Spoke With	Result of Reference Check