

APPLICATION FOR EMPLOYMENT

La Crosse Center
300 Harborview Plaza
La Crosse WI 54601
(608) 789-7400

Personal Information

Name: _____

Last

First

MI

Social Security Number: _____

Drivers License Number: _____ State: _____

Home Address: _____

_____ Phone: _____

City

State

Zip

Email Address: _____

La Crosse Resident? _____ How Long? _____ Are you eligible to work in the USA? _____

Position Applying For:

Casual Laborer Stage Security Usher Box Office
Bartender Concessions Worker Runner

Referred By: _____

Clerical Skills

Please check the computer programs you are proficient with:

Microsoft Word Microsoft Excel Microsoft Access Microsoft Power Point

Education

High School: _____

College: _____

Technical College: _____

Are You Currently A Student? _____ Are You Available Summer Months? _____

Course of Study: _____

Employment History

Employer: _____ Phone Number: _____

Address: _____

Dates Employed – From: _____ To: _____

Position: _____

Duties: _____

Employer: _____ Phone Number: _____

Address: _____

Dates Employed – From: _____ To: _____

Position: _____

Duties: _____

Employer: _____ Phone Number: _____

Address: _____

Dates Employed – From: _____ To: _____

Position: _____

Duties: _____

Personal References

Name/Occupation/Employer	Address	Phone Number

I understand that falsification of this application may result in disqualification or removal from a city position.

Signature: _____ Date: _____

Solely to help the City of La Crosse comply with government record keeping, reporting and other legal requirements, we request that you please fill out the attached Equal Employment Opportunity Form. This data is voluntary and will be kept in a confidential file separate from the application. This information will in no way be used in the decision to hire or promote. Your cooperation is appreciated.

EQUAL EMPLOYMENT OPPORTUNITY DATA FORM

NAME:

(Last)

(First)

(Middle)

POSITION APPLYING FOR: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____

GENDER: MALE / FEMALE

ETHNIC/RACE IDENTIFICATION

_____ WHITE/CAUCASIAN

_____ BLACK

_____ HISPANIC / CHICANO / PUERTO RICAN / MEXICAN AMERICAN /
SPANISH AMERICAN / CUBAN

_____ AMERICAN INDIAN OR ALASKAN NATIVE

_____ ASIAN / PACIFIC ISLANDER

_____ OTHER RACE (MULATTO, CREOLE, MESTIZO)

_____ TWO OR MORE RACES

REFERRAL SOURCE:

_____ LA CROSSE TRIBUNE

_____ OTHER ADVERTISEMENT (Please Specify) _____

_____ FRIEND / RELATIVE

_____ OTHER (Specify): _____