



### EMPLOYMENT HISTORY

#### OPEN RECORDS/PUBLIC INFORMATION

The City sometimes receives requests under the Wisconsin Public Records Law for the identity of job applicants and copies of the job applications. However, except for those applicants who are final candidates for positions, the City is prohibited from releasing the identity of applicants who have indicated in writing that they do not wish their identity to be revealed.

If you do not wish us to reveal your identity, please check the following box:

Are you legally authorized to work permanently for any employer within the United States? Yes  No

There may be a possibility of employment with other organizations. If so, may we refer your name? Yes  No

Give the titles and dates of all City examinations you have taken within the last six months (if none, print "NONE"):

If you are CURRENTLY  or were PREVIOUSLY  employed by the City of Milwaukee, list the following:

POSITION TITLE	DEPARTMENT	EMPLOYEE ID #	FROM (MO./YR.)	TO (MO./YR.)
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If you have ever been convicted of a felony or misdemeanor, or have felony or misdemeanor charges pending, list details below.

If you have NEVER been convicted of a felony or misdemeanor, and have no felony or misdemeanor charges pending, please fill in NO below.

YOU MUST PROVIDE YOUR BIRTHDATE ON THE PAGE 6 OF THIS APPLICATION. YOUR BIRTHDATE WILL BE USED FOR CONVICTION VERIFICATION ONLY. In the space below list your CHARGE, DATE, LOCATION, COURT and DISPOSITION OF CASE.

CHARGE	DATE	LOCATION	COURT	DISPOSITION OF CASE
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NOTE: Convictions are not an automatic bar to employment but are reviewed in relation to the job for which you applied. Felony and misdemeanor convictions not reported on the application may be cause for rejection or discharge.

**READ CAREFULLY BEFORE SIGNING** -- I certify that all answers to questions on this application are true and complete. I understand that falsification of this application may result in disqualification or removal from a City position. I understand that a City Charter Ordinance requires City employees to live in the City. I also understand that covered employees are compensated for overtime work in accordance with the Fair Labor Standards Act. Individuals should discuss overtime pay practices with the appointing authority prior to accepting employment with the City. I authorize the City to make any inquiries about and receive any information about my suitability for employment. I give permission to persons contacted to provide such information. Such inquiries may include, but are not limited to the quality and quantity of my work, work record, qualifications, education and criminal records as defined above. I forever waive, release and covenant not to sue any person or organization for any result of providing, obtaining or acting upon such information. I understand that such information is sought with confidentiality, and I will not request copies of such information. A copy of this authorization shall be effective as the original.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**I. College Background**

A. List your current college program of study (including major and minor):

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

B. Indicate your current college status (based upon credits earned to date toward your current program of study):  
(Circle One)      Freshman                  Sophomore                  Junior                  Senior

C. Anticipated date of graduation from your current college program: \_\_\_\_\_

**II. College Level Course Work in Engineering and Related Studies**

A. Please list by title the college courses you have completed in the following subjects:

1. Mathematics \_\_\_\_\_

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

2. Computer Technology \_\_\_\_\_

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

3. Sciences (Biology, Chemistry, Physics, etc.) \_\_\_\_\_

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

4. Transportation Engineering or Related Subjects \_\_\_\_\_

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

B. List any colleges or universities you have previously attended (include dates): \_\_\_\_\_

\_\_\_\_\_  
Period of Enrollment: \_\_\_\_\_

C. List by subject and title any other college courses you have completed which are relevant to the position of Traffic Control Assistant: \_\_\_\_\_

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

**III.** If you are (or have been) affiliated with professional organizations related to your college program of study, list such organizations below and include information that explains your level of involvement.

Professional Organization	Membership Dates	Offices Held	Other Involvement

IV. Experience: List below all job-related experience. Treat each job title as a new entry. Begin with your present position and work back. (If needed, attach additional sheets using same format.)

■ Title \_\_\_\_\_  
 Employer \_\_\_\_\_  
 From \_\_\_\_\_ to \_\_\_\_\_ Total Months \_\_\_\_\_ Full Time  Part Time   
 Month/Yr Month/Yr  
 If Part Time, hours per week: \_\_\_\_\_  
 Address of Employer \_\_\_\_\_  
 Briefly describe duties and responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

■ Title \_\_\_\_\_  
 Employer \_\_\_\_\_  
 From \_\_\_\_\_ to \_\_\_\_\_ Total Months \_\_\_\_\_ Full Time  Part Time   
 Month/Yr Month/Yr  
 If Part Time, hours per week: \_\_\_\_\_  
 Address of Employer \_\_\_\_\_  
 Briefly describe duties and responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

V. List any other training or experience which qualifies you for the position of Traffic Control Assistant that has not been listed above.

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

VI. Are you available to work full-time during the summer of 2009? (Answer Yes or No and please explain if your reply is No).

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





Qualified veterans who obtain passing scores on open competitive examinations may be entitled to have additional points added to their scores. Individuals entitled to veteran's preference points also include disabled veterans, spouses of certain disabled veterans or unremarried spouses of eligible veterans who were killed in action or died of a service-connected disability. Candidates must qualify under Wisconsin state statutes defining veterans for this purpose.

Wisconsin State Statute 230.16(7m)(a) defines a "veteran" as a person who fulfills at least one of the following requirements:

1. Served on active duty in the U.S. armed forces for at least 180 days, not including training.
2. Was discharged from the U.S. armed forces because of a disability incurred during active duty or because of a disability that is later adjudicated by the U.S. department of veterans affairs to have been incurred during active duty.
3. Was honorably discharged from the U.S. armed forces.
4. Is eligible to receive federal veterans benefits.

**Documentation Required**

If you are an eligible veteran, you must attach an undeleted copy of your DD-214. Undeleted means that the copy you submit must include the bottom portion that indicates the type of discharge you received. If you have not yet been released from active duty, you may present individual orders or a letter from your commanding officer attesting to honorable service and the dates thereof, instead of the DD-214. If you are the spouse of a disabled wartime veteran whose disability is at least 70%, or if you are the un-remarried spouse of a veteran who was killed in action or died of a service-connected disability, you may be eligible to claim preference points. In addition to the documentation described above, you must also provide documentation of your relationship to the veteran and of the veteran's compensable disability.

Do you claim veteran's preference points based on the criteria listed above?

Yes \_\_\_\_\_ No \_\_\_\_\_