



TOMAH POLICE DEPARTMENT

Employment Application for School Crossing Guard



APPLICANT INFORMATION

Last Name: _____ First Name: _____ M.I.: _____ DOB: _____

Home Address: _____ Apartment: _____

City: _____ State: _____ Zip Code: _____

Cell Ph: _____ Home Ph: _____ Date Available to Start: _____

Social Security #: _____ E-Mail: _____

Position Applied For: **SCHOOL CROSSING GUARD** Desired Salary: _____

Are you a citizen of the United States? Yes ☐ No ☐ If no, are you authorized to work in the U.S.? Yes ☐ No ☐

Have you ever worked for the City of Tomah? Yes ☐ No ☐ If so, when? _____

Have you ever been convicted of a felony? Yes ☐ No ☐ If yes, explain: _____

EDUCATION

High School: _____ Address: _____

From _____ To _____ Did you graduate? Yes ☐ No ☐ Degree: _____

College: _____ Address: _____

From _____ To _____ Did you graduate? Yes ☐ No ☐ Degree: _____

Other Education: _____ Address: _____

From _____ To _____ Did you graduate? Yes ☐ No ☐ Degree: _____

REFERENCES *(Please list three professional references)*

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Home Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Home Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone Number: _____

Home Address: _____

PREVIOUS EMPLOYMENT

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From _____ To _____ Reason For Leaving: _____

May we contact your previous supervisor for a reference? Yes ☐ No ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From _____ To _____ Reason For Leaving: _____

May we contact your previous supervisor for a reference? Yes ☐ No ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From _____ To _____ Reason For Leaving: _____

May we contact your previous supervisor for a reference? Yes ☐ No ☐

MILITARY SERVICE

Did you service in a branch of the United States Military? Yes ☐ No ☐

Branch: _____ From _____ To _____

Rank at Discharge: _____ Type of Discharge? _____

If other than honorable, please explain: _____

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

For more information, check out WWW.TOMAHPOLICE.COM

You can also contact Sgt. Pete Huneck at 608-374-7408 or PHUNECK@TOMAHPOLICE.COM with questions.