



APPLICATION FOR COMMISSIONS AND BOARDS

*ALL AREAS MUST BE FILLED OUT, INCLUDING SIGNATURE AND DATE

FULL NAME (PRINT)			DATE OF BIRTH	SOCIAL SECURITY NUMBER
ADDRESS		EMAIL		TELEPHONE NUMBER - HOME
CITY	ST	ZIP	PREFERRED METHOD OF CONTACT	TELEPHONE NUMBER - MOBILE
COMMISSION OR BOARD APPLYING FOR:			DO YOU GIVE THE VILLAGE OF SALEM LAKES PERMISSION TO RUN A CRIMINAL BACKGROUND CHECK? <input type="checkbox"/> YES <input type="checkbox"/> NO	
LIST COMMISSION(S) OR BOARDS PREVIOUSLY SERVED ON OR CURRENTLY SERVING ON, INCLUDING DATES:				
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE US ON AN UNRESTRICTED BASIS? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU RESIDE WITHIN THE VILLAGE LIMITS? <input type="checkbox"/> NO <input type="checkbox"/> YES – If yes, how long? _____		
NAMES OF ANY RELATIVES EMPLOYED BY THE VILLAGE OF SALEM LAKES AND YOUR RELATION:				
WHAT EXPERIENCES, SKILLS, OR QUALIFICATIONS DO YOU FEEL WOULD ESPECIALLY PREPARE YOU TO SERVE ON THE COMMISSION OR BOARD?				
PLEASE SUMMARIZE WHY YOU WOULD LIKE TO BE CONSIDERED TO SERVE ON THIS COMMISSION OR BOARD:				
DO YOU CURRENTLY HAVE ANY PENDING CRIMINAL CHARGE(S) AGAINST YOU AND/OR HAVE YOU EVER BEEN CONVICTED OF A CRIME – EITHER A MISDEMEANOR OR FELONY? <input type="checkbox"/> NO <input type="checkbox"/> YES – please provide the nature of the conviction or pending charge and circumstances surrounding it. Conviction records or pending arrest records do not constitute an automatic bar to employment and will be considered only if there is a substantial relationship to the circumstances of the position or if there is a bona fide occupational qualification inherent in the position that requires this information prior to hiring.				

CERTIFICATION

I certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that if I am employed by the Village of Salem Lakes, that any false statements, omissions, or misrepresentations may result in my dismissal. I authorize the Village of Salem Lakes to investigate all facts set forth in this application and I release the Village of Salem Lakes from any liability. I acknowledge and understand that the Village of Salem Lakes is an "at will" employer. Therefore, any employee (regular, temporary, or other type of employee) may resign at any time, just as the Village of Salem Lakes may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

SIGNATURE

DATE

RETURN COMPLETED APPLICATION TO: EILEENE ANDERSON, INTERIM VILLAGE CLERK
SALEM LAKES VILLAGE HALL
PO BOX 443
9814 ANTIOCH ROAD
SALEM, WI 53168

OR VIA EMAIL TO: EANDERSON@VOSLWI.ORG

FOR OFFICE USE ONLY

DATE APPLICATION RECEIVED:	APPLICATION RECEIVED BY (please print):	DATE OF BACKGROUND CHECK:
INTERVIEWED BY:		DATE OF INTERVIEW:
COMMISSION OR BOARD APPOINTED TO:		TERM:

INTERVIEW NOTES:

Revision date: 1.31.2024