



513 East 17<sup>th</sup> Street  
Marshfield, WI 54449  
Phone: 715-387-1261

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**NEW Fair Dates: Tuesday, August 21<sup>st</sup> thru Sunday, August 26<sup>th</sup>, 2018**

### EMPLOYMENT APPLICATION

*This application must be filled out fully to be considered for employment.*

Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Address: \_\_\_\_\_  
(Street)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Number: \_\_\_\_\_ Secondary Number: \_\_\_\_\_

Date Of Application: \_\_\_\_\_ Position(s) Applying For: \_\_\_\_\_

Are you a citizen of the U.S. or legally authorized to work in the U.S.?  Yes  No

**Applicant must be 16 years old by August 1<sup>st</sup>, 2018. Anyone being hired under 18 years old as of August 1<sup>st</sup>, 2018 must have a work permit before beginning duties.**

Day(s) available for work: \_\_\_\_\_

Hours available for work: \_\_\_\_\_

Please list any past experience(s), skills or qualifications which relate to the position which you are applying for:

\_\_\_\_\_

### REFERENCES:

Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

## EDUCATION

NAME AND ADDRESS OF SCHOOL:	YEARS ATTENDED	CIRCLE LAST YEAR COMPLETE				DID YOU GRADUATE?
High School		1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No
Business/Technical		1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No
College		1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please list any academic honors or special awards you have received:

  
  
  

## WORK HISTORY

**Present or Last Employer:**

Company Name: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Position(s) Held: \_\_\_\_\_  
 Full-Time      Part-Time      Supervisor's Name: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_ May we contact for reference? \_\_\_\_\_

**Employer:**

Company Name: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Position(s) Held: \_\_\_\_\_  
 Full-Time      Part-Time      Supervisor's Name: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_ May we contact for reference? \_\_\_\_\_

**Employer:**

Company Name: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Position(s) Held: \_\_\_\_\_  
 Full-Time      Part-Time      Supervisor's Name: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_ May we contact for reference? \_\_\_\_\_

**AGREEMENT TO INVESTIGATION AND RELEASE**

**Read carefully and acknowledge by your written signature and today's date**

I certify that the facts set forth in this application are true and complete, and I authorize investigation of the statements I have made.

I release from any and all liability representatives of the Central Wisconsin State Fair Association for their acts performed in good faith and without malice in connection with evaluating my application, credentials and qualifications. I further authorize any party having information bearing upon my qualifications for employment to release such information to the Central Wisconsin State Fair Association (unless otherwise stated). I also release from any and all liability all individuals and organizations who provide information to the Central Wisconsin State Fair Association in good faith and without malice concerning my employment competence, ethics, character and other qualifications, including the privileged or confidential information.

**I understand that any false statements on this application shall be sufficient cause for denial of employment or subsequent dismissal.**

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

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

**Reference Check Comments:** \_\_\_\_\_

**Date Application Received:** \_\_\_\_\_ **Date Interviewed:** \_\_\_\_\_

**Interview Notes:** \_\_\_\_\_

**Date Job Offered:** \_\_\_\_\_ **Date Accepted/Declined:** \_\_\_\_\_

**Additional Comments:** \_\_\_\_\_