

REFERRAL SOURCE

Job advertisement (indicate what source)
___ Friend ___ Cable TV
___ Website ___ Classified ad
___ Village employee



Today's date: _____

Position applying for: _____

Applying for: ___ Full-time
___ Part-time ___ Seasonal

Application for Employment
Village of La Grange Park
(an Equal Opportunity Employer)

PERSONAL

Please Type or Print in Ink

Name: _____
Last First Middle

Address: _____
Street City State Zip

Home phone: _____ Work phone: _____

Social Security Number: _____

- Have you been employed by the Village of La Grange Park before? Yes No
- Are you lawfully permitted to become employed in this country? Yes No
- Are you 18 years or older? Yes No
- Have you ever been convicted of a felony? Yes No

If the job for which you are applying requires a drivers license:

- Can you provide proof of possessing a valid license? Yes No
- Do you have a valid CDL? Yes No
- Do you have any relatives who are currently employed by the Village?
If yes, list names and relationship. _____

EDUCATION / MILITARY EXPERIENCE

Circle highest grade completed: < 6 7 8 9 10 11 12 GED College: 1 2 3 4 5 6

Name of last high school attended: _____
City & State: _____

Name of last college attended: _____
City & State: _____
Major field of study: _____ Degree: _____

List any specialized training, apprenticeship, skills and extra-curricular activities that might relate to this position:

List any licenses or certificates you possess: _____

EDUCATION / MILITARY EXPERIENCE (continued)

Are or were you a member of any branch of the U.S. armed forces (including reserves or National Guard)?
_____ Yes _____ No

If yes, please indicate:

The branch of the armed forces of which you were or are a member _____
Nature of duties _____ Rank _____
Date entered _____
Date discharged (if applicable) _____ Type of discharge (if applicable) _____

EMPLOYMENT HISTORY

begin with your present or most recent position

You are encouraged to submit a personal resume in addition to this application if you so desire.

Employer: _____
Street Address: _____ Phone: () _____
City: _____ State: _____
Date of Employment: from _____ to _____ Starting Salary: _____ Ending Salary: _____
Supervisor's name and title: _____
Your job title: _____ Describe the work you performed: _____
Reason for leaving: _____

May we contact your present employer? Yes No

Employer: _____
Street Address: _____ Phone: () _____
City: _____ State: _____
Date of Employment: from _____ to _____ Starting Salary: _____ Ending Salary: _____
Supervisor's name and title: _____
Your job title: _____ Describe the work you performed: _____
Reason for leaving: _____

Employer: _____
Street Address: _____ Phone: () _____
City: _____ State: _____
Date of Employment: from _____ to _____ Starting Salary: _____ Ending Salary: _____
Supervisor's name and title: _____
Your job title: _____ Describe the work you performed: _____
Reason for leaving: _____

REFERENCES

List three persons, not related to you and not former employers, who have known you for a period of time, preferably more than five years.

Name: _____ Years Known: _____
Business, occupation, or profession: _____
Street address: _____
City: _____ State: _____ Zip: _____
Home phone: () _____ Work phone: () _____
In what capacity do you know this person? _____

Name: _____ Years Known: _____
Business, occupation, or profession: _____
Street address: _____
City: _____ State: _____ Zip: _____
Home phone: () _____ Work phone: () _____
In what capacity do you know this person? _____

Name: _____ Years Known: _____
Business, occupation, or profession: _____
Street address: _____
City: _____ State: _____ Zip: _____
Home phone: () _____ Work phone: () _____
In what capacity do you know this person? _____

AUTHORIZATION

I hereby certify that the statements given herein are true and complete to the best of my knowledge and belief and that any false or misleading statements or misrepresentations, as stated or implied, on this application or any other employment forms or during any interview may be sufficient reason to prevent my employment and may be cause for dismissal if hired.

In consideration of my employment, I agree to conform to the Village's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the Village of La Grange Park's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the Village of La Grange Park.

I authorize investigation of all information I provided in conjunction with my application for employment, including contacting my supervisors in order to furnish you with any and all information concerning my previous employment and other pertinent information they may have, personal or otherwise, and thereby release any and all parties from all liability for any damage that may result from this process.

My signature below confirms I have read, understand and agree with the above statements.

Signature: _____ Date: _____

Print Name: _____