

## APPLICATION FOR EMPLOYMENT VILLAGE OF DOLTON 14122 DR.MARTIN LUTHER KING JR DR DOLTON, IL 60419 708.849.4000

The Village is firmly committed to equality of employment opportunity. Conditions of employment will be provided without regard to race, color, religion, sex, national origin, ancestry, age, sexual orientation, marital or parental status or unfavorable discharge from military service, mental or physical disability. The Village will not deny equality of opportunity to any qualified individual who is able, with or without reasonable accommodation, to perform the essential functions of the employment position for which he or she applies.

PERSONAL INFORMATION					
Position/Department applying for					
Date	Email Address				
NameLast	First Middle Initial				
Address					
City					
Preferred Phone_()	Other Phone_()				
GENERAL	EMPLOYMENT QUESTIONS				
Are you legally entitled to work in this country?	?				
2. Are you 18 years or order? Yes No	If under 18, give birth date				
3. Are you related to anyone employed by the Villa	age of Dolton including an elected official?				
4. Are you a veteran of the U.S. Military?	es No				
	ons and all necessary job assignments of the particular job for which you				
6. Have you ever been discharged or resigned not	t in good standing from any job?				
If yes, please provide an explanation.					

## **EDUCATION BACKGROUND**

TYPE OF SCHOOL	NAME OF SCHOOL		YEARS COMPLETED	MAJOR AREA OF STUDY	DIPLOMA/DEGREE GED	
High School/GED						
College/University						
Graduate						
Other						
List any professional and	l/or occupational licens	ses or certificati	ions held.			
TITLE	E LICENSE		NUMBER	EXPIRATION DATE		
		EMPLOYMEN	NT HISTORY			
Please sta	art with your present or mo			o submit a personal r	esume.	
Position Held			Description of Duties		_	
Supervisor's Name/Title			Description of Sancs			
Employer						
Address	Phone		Reason for Leaving			
Date Hired	Date Separated					
Position Held			Description of Duties			
Supervisor's Name/Title						
Employer						
Address	Phone		Reason for Leaving			
Date Hired	Date Separated					
		<u> </u>				
Position Held			Description of Duties			
Supervisor's Name/Title	_					
Employer						
Address	Phone		Reason for Leaving			
Date Hired	Date Separated					

## PROFESSIONAL REFERENCES 1. Name/Title Name/Title Business Name: Business Name: Work Phone ( ) Work Phone ( ) NOTE: Additional references may be requested as part of the hiring process. Village Web Site HOW DID YOU HEAR ABOUT THE POSITION FOR WHICH **Professional Organizational Website** YOU ARE APPLYING? **Printed Publication** Referral Other Source Please Read Carefully **CERTIFICATION** I do solemnly swear (or certify) that the statements made and the information provided in conjunction with my application for employment are true, correct and complete, to the best of my knowledge. I understand that any false statement, in any detail, on the employment application or regarding any aspect of my applying for employment will be considered sufficient to disqualify me from consideration for employment, or if I am employed, dismissal, no matter when discovered. I understand any offer of employment is contingent on my submission to a successful completion of a medical examination, including drug testing. I further understand that as a condition of my continued employment, I may, from time to time be required to submit to additional examinations or drug testing. I understand the Village of Dolton conducts a criminal background check by fingerprinting and that (a) if I do not participate in the fingerprinting, I will not be eligible for employment; and (b) any offer of employment is subject to the results of the criminal background check. I understand employment in certain positions is contingent upon and requires proof of a valid Class C or D State of Illinois driver's license and that continued employment is subject to maintaining the appropriate license in force. Further, certain positions require that candidates submit to a credit check in order to be considered and any subsequent offer of employment is subject to the results of the credit check. I acknowledge this application is not intended to be a contract of employment and that employment with the Village of Dolton is on an "at will" basis, unless specified to the contrary as part of a collective bargaining agreement or written employment agreement. As such, the employment relationship may be ended by either the employee or the Village of Dolton. Applicant Signature: Date By checking this box, I acknowledge that I have read, understand and agree with all of the above stated information. RELEASE OF INFORMATION I authorize the officers or employees of any former employer to furnish a complete history of my employment with their organization. I further authorize any law enforcement agency, administrator, state agency, educational institution or private information bureau that has any record or knowledge of my employment history, credit history, motor vehicle operation history, criminal record, education or other history or record to provide that information. I consent to a medical examination, including drug testing and authorize the results of any testing or medical evaluation concerning my fitness for duty be provided to the Village of Dolton. I release the Village of Dolton from any and all liability for damages which may result from conducting these investigations or obtaining any investigative or medical reports or test results. I further release any individual from any and all liability for damages that may result to me on account of my compliance with this authorization.

By checking this box, I acknowledge that I have read, understand and agree with all of the above stated information.

Applicant Signature: