

Application for Employment --PLEASE PRINT



Date of Application ____/____/____

Position (s) Applied For _____

Type of employment desired? Full Time Part Time Temporary Seasonal Internship

Referral Source Newspaper Ad _____ Website _____ Walk-in

Private Employment Agency Employee Relative Friend

Name of Source _____ Other _____

Name

_____ Last First Middle

Mailing Address _____ Street City State Zip Code

Physical Address if different _____ Street City State Zip Code

_____ Street City State Zip Code

Home Phone (_____) _____ Cell Phone (_____) _____

Area Code Area Code

Preference: Home Phone Cell Phone Best time/day to reach you? _____

May we contact you at work? YES NO

If yes, work number and best time to call (_____) _____

Area Code Time

Email address: _____

Have you filed an application here before? YES NO

If yes, when? ____/____/____

Have you ever been employed here before?.... YES NO If yes, give dates ____/____/____ To ____/____/____

Are you legally eligible for employment in this county? YES NO

(Proof of U.S. Citizenship or immigration status will be required upon employment.)

Date available for work ____/____/____

Are you on lay-off and subject to recall? YES NO

Will you travel if job requires it? YES NO

Are you able to meet the requirements of the position? YES NO

Will you work overtime if required? YES NO

Have you ever been bonded? YES NO

Employment History --List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience.

Employer #1	Telephone ()	Dates Employed		Summarize the work performed and job responsibilities
		From	To	
Address				

Job Title	Starting Compensation		
Immediate Supervisor and Title	\$	Per	
Reason for Leaving	Final Compensation		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	\$	Per	
Employer #2	Telephone ()	Dates Employed From To	Summarize the work performed and job responsibilities
Address			
Job Title	Starting Compensation		
Immediate Supervisor and Title	\$	Per	
Reason for Leaving	Final Compensation		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	\$	Per	
Employer #3	Telephone ()	Dates Employed From To	Summarize the work performed and job responsibilities
Address			
Job Title	Starting Compensation		
Immediate Supervisor and Title	\$	Per	
Reason for Leaving	Final Compensation		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	\$	Per	
Employer #4	Telephone ()	Dates Employed From To	Summarize the work performed and job responsibilities
Address			
Job Title	Starting Compensation		
Immediate Supervisor and Title	\$	Per	
Reason for Leaving	Final Compensation		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	\$	Per	

Comments (including explanation of any gaps in employment). _____

Skills and Qualifications-- Summarize special skills and qualifications acquired from employment or other experiences.

Educational Background -- List the last three (3) schools attended, *starting with the most recent.*

School	Years Completed	Degree/Diploma	GPA/Class Rank	Major	Minor

References--List three (3) professional references who are *not* related to you.

Name and Relationship	Telephone	Years Known
	()	
	()	
	()	

Professional, trade, business, or civic associations-- (Exclude membership which would reveal sex, race, religion, national origin, color, age, disability or other protected status.)

Organization	Offices Held

Accomplishments and /or Awards-- (Exclude information which would reveal sex, race, religion, national origin, color, age, disability or other protected status.)

List any additional information you would like us to consider. _____

- It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and / or separation from the employer’s service if I have been employed.
- I give the Employer the right to investigate and to secure additional information about me such as academic, achievement, employment, attendance, performance, disciplinary, background checks, references, criminal history records, etc., if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.
- I waive any right that I may have pursuant to the Illinois Personnel Record Review Act to written notice from former or current employers before they release information to Grundy County.
- The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant’s consideration for employment on a basis prohibited by local, state, or federal law.
- Grundy County is an Equal Opportunity Employer and will give consideration to all qualified applicants for employment without regard to race, color, religion, national origin, ancestry, age, sex, marital status, order of protection status, disability, marital status, sexual orientation, pregnancy, or unfavorable discharge from military service as those terms are defined in Section 1-103 of the Illinois Human Rights Act (775 ILCS 5/1-103).
- I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.
- I hereby authorize all previous employers and all references to release any relevant information to Grundy County.

Signature of Applicant _____ Date ____/____/____