



185 Spring Avenue
 Glen Ellyn, IL 60137
 (630) 858-2462
 (630) 858-2479 Fax

APPLICATION FOR EMPLOYMENT

TODAY'S DATE
DATE AVAILABLE TO START WORK
REFERRED BY

PLEASE PRINT CLEARLY

LAST NAME	FIRST	MIDDLE	ANY OTHER NAME USED IN PREVIOUS EMPLOYMENT, EDUCATION, ETC.	SOCIAL SECURITY NUMBER
MAILING ADDRESS	STREET	APT.	CITY	STATE ZIP
HOME PHONE	BUSINESS PHONE	PREVIOUSLY WORKED AT THE GLEN ELLYN PARK DISTRICT?	<input type="checkbox"/> NO <input type="checkbox"/> YES	WHEN?

POSITION INFORMATION

POSITION APPLIED FOR	SALARY REQUIREMENTS	APPLYING FOR <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME If part-time, how many hours are you interested in working per week? _____
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WORK EXPERIENCE

MOST RECENT EMPLOYER	ADDRESS	STREET	CITY	STATE
KIND OF BUSINESS	EMPLOYED FROM: MO YR	TO: MO YR	STARTING SALARY PER	LAST SALARY PER
JOB TITLE	SUPERVISOR	REASON FOR LEAVING	MAY WE CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
DESCRIBE YOUR JOB				PHONE NUMBER
NEXT MOST RECENT EMPLOYER	ADDRESS	STREET	CITY	STATE
KIND OF BUSINESS	EMPLOYED FROM: MO YR	TO: MO YR	STARTING SALARY PER	LAST SALARY PER
JOB TITLE	SUPERVISOR	REASON FOR LEAVING	MAY WE CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
DESCRIBE YOUR JOB				PHONE NUMBER
NEXT MOST RECENT EMPLOYER	ADDRESS	STREET	CITY	STATE
KIND OF BUSINESS	EMPLOYED FROM: MO YR	TO: MO YR	STARTING SALARY PER	LAST SALARY PER
JOB TITLE	SUPERVISOR	REASON FOR LEAVING	MAY WE CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
DESCRIBE YOUR JOB				PHONE NUMBER
NEXT MOST RECENT EMPLOYER	ADDRESS	STREET	CITY	STATE
KIND OF BUSINESS	EMPLOYED FROM: MO YR	TO: MO YR	STARTING SALARY PER	LAST SALARY PER
JOB TITLE	SUPERVISOR	REASON FOR LEAVING	MAY WE CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
DESCRIBE YOUR JOB				PHONE NUMBER

Please turn over

PROFESSIONAL

YOUR ANSWER TO THIS QUESTION IS VOLUNTARY. YOUR ANSWER SHOULD BE LIMITED TO ASSOCIATIONS WHICH ARE RELEVANT TO THE POSITION APPLIED FOR AND YOU ARE NOT REQUIRED TO LIST ASSOCIATIONS OR MEMBERSHIPS WHICH TEND TO REVEAL RACE, RELIGION, SEX, DISABILITIES, NATIONAL ORIGIN, ETC.

PROFESSIONAL AND VOLUNTEER ACTIVITIES AND ACHIEVEMENTS

MACHINES YOU CAN OPERATE AND BUSINESS SKILLS

EDUCATION

NAME & LOCATION OF SCHOOL	PERIOD ATTENDED	DEGREE/DIPLOMA (YES OR NO)	COURSE OF STUDY
HIGH SCHOOL	XXXXXXXXXX		
	FROM: TO:		
	FROM: TO:		
	FROM: TO:		
	FROM: TO:		
AWARDS, HONORS & ACTIVITIES IN SCHOOL			

LIST ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN THIS APPLICATION

GENERAL

ARE YOU A CITIZEN OR OTHERWISE LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

(PROOF OF IDENTITY AND AUTHORIZATION TO WORK WILL BE REQUIRED UPON EMPLOYMENT IN ACCORDANCE WITH RELEVANT LAW.)

ARE YOU ABLE TO PERFORM THE ESSENTIAL JOB FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING WITH OR WITHOUT REASONABLE ACCOMMODATION? (A DESCRIPTION OF THE JOB FOR WHICH YOU ARE APPLYING IS AVAILABLE AT THE TIME OF APPLICATION.) YES NO

HAVE YOU BEEN CONVICTED OF ANY FELONY? YES NO

(A YES ANSWER WILL NOT AUTOMATICALLY DISQUALIFY YOU FROM BEING CONSIDERED A CANDIDATE FOR EMPLOYMENT.)

IF YES, PLEASE EXPLAIN

Applicants are considered for all positions without regard to race, color, religion, sex, sexual orientation, age, national origin, or physical or mental disability to the extent required by law. The institution also complies with all regulations relating to Vietnam era veterans and disabled veterans.

I understand that this employment application, and any other policies, procedures or handbooks that I might receive, do not constitute a contract of employment or any contractual commitment and no representative of the Glen Ellyn Park District other than the hiring authority has any authority to enter into any agreement to the contrary. If an employment relationship is established, I understand that neither I nor the Glen Ellyn Park District is bound to an employment contract or a commitment to employment for a definite period of time, and the right of either party to terminate the employment relationship at any time, for any reason, is not limited.

I affirm that my answers to the foregoing questions are complete and true and that I have not knowingly withheld any information which could affect my application unfavorably. I further understand that misrepresentations or omissions on matters covered by this application could lead to refusal of employment or termination.

I authorize an investigation of any matters referred to in this application and authorize all persons and employers listed herein to provide information about me as requested.

I understand that depending on the position applied for, I may be asked to submit to a pre-employment physical as well as a drug screen test. I also understand that I will be asked to submit to a drug screen test if the position requires that I drive a Park District vehicle.

SIGNATURE

DATE