

Chicago Ridge Police Department

Employment Application



Name: _____

Date submitted: _____

- **Include with this application** a copy of your Drivers License, a state identification card or other form of government identification. Please submit copies of any State of Illinois certifications you may currently hold.
- **Civil Service position:** Applications submitted for employment will be retained as required by the Illinois Compiled Statutes.
- **Non-civil service position (civilian):** The Chicago Ridge Police Department will retain submitted applications seeking employment for 6 months.

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status. (PLEASE PRINT BELOW)

Position(s) Applied For			Date		
How Did Your Learn About Us?					
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend		<input type="checkbox"/> Walk-In	
<input type="checkbox"/> Employment Agency		<input type="checkbox"/> Relative		<input type="checkbox"/> Referred by: _____	
Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number				Social Security Number	

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

Have you ever been employed with us before? Yes No
If Yes, give date _____

Are you currently employed? Yes No
If Yes, give date _____

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment) Yes No

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

SCHOOL NAME AND LOCATION	HIGH SCHOOL				UNDERGRADUATE COLLEGE/UNIVERSITY				GRADUATE/PROFESSIONAL			
	9	10	11	12	1	2	3	4	1	2	3	4
YEARS COMPLETED												
DIPLOMA/DEGREE												
DESCRIBE COURSE OF STUDY												
DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, SKILLS AND EXTRA-CURRICULAR ACTIVITIES												
DESCRIBE ANY HONORS YOU HAVE RECEIVED												
STATE ANY ADDITIONAL INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION												

INDICATE ANY FOREIGN LANGUAGES YOU CAN SPEAK, READ AND/OR WRITE

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

Are you a military veteran?

Yes No

Have you ever had any job-related training in the United States military?

Yes No

If yes, please describe

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

COMPANY _____ ADDRESS _____
CITY _____ STATE _____ TELEPHONE _____
POSITION _____ SUPERVISOR _____
DATES WORKED FROM: _____ TO: _____
WAGE: _____ REASON FOR LEAVING: _____
WORK PERFORMED: _____

COMPANY _____ ADDRESS _____
CITY _____ STATE _____ TELEPHONE _____
POSITION _____ SUPERVISOR _____
DATES WORKED FROM: _____ TO: _____
WAGE: _____ REASON FOR LEAVING: _____
WORK PERFORMED: _____

COMPANY _____ ADDRESS _____
CITY _____ STATE _____ TELEPHONE _____
POSITION _____ SUPERVISOR _____
DATES WORKED FROM: _____ TO: _____
WAGE: _____ REASON FOR LEAVING: _____
WORK PERFORMED: _____

COMPANY _____ ADDRESS _____
CITY _____ STATE _____ TELEPHONE _____
POSITION _____ SUPERVISOR _____
DATES WORKED FROM: _____ TO: _____
WAGE: _____ REASON FOR LEAVING: _____
WORK PERFORMED: _____

Summarize Special Skills and Qualifications

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby acknowledge that any employment relationship with the Village of Chicago Ridge is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized officer of the Village.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Interviewer _____ Date _____

Employed Yes No

Date of Employment _____

Job Title _____ Hourly Rate _____ Department _____

By _____
Name and Title Date

Notes

