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?						
☐ Advertisement	☐ Friend	□ Walk-In				
☐ Employment Agency	□ Relative	☐ Referred by:				
Last Name	First Nam	e	Middle Name			
Address Number	Street	City	State	Zip Code		
Telephone Number			Social S	ecurity Number		
If you are under 18 years of ag	e, can you provide	required proof of your eli	gibility to work?	☐ Yes ☐ No		
Have you ever filed an applicat	ion with us before	?		□ Yes □ No		
Have you ever been employed	with us before?		If Yes, give date_	☐ Yes ☐ No		
If Yes, give date_ Are you currently employed?						
May we contact your present e	mployer?			□ Yes □ No		
Are you prevented from lawful Immigration Status? (Proof of c	• •	oyed in this country becau status will be required upon emplo		□ Yes □ No		
On what date would you be ava	ilable for work?					
Are you available to work:	☐ Full Time	□ Part Time □	Temporary			
Are you currently on "lay-off" s	tatus and subject to	o recall?		□ Yes □ No		
Have you been convicted of a fe	elony within the las	st 7 years?		□ Yes □ No		
If Yes, please explain				<u>=</u> :		

TITLE	TO	A 1777	
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		HIGH SCHOOL				UNDERGRADUATE COLLEGE/UNIVERSITY				GRADUATE/ PROFESSIONAL			
SCHOOL NAME AND LOCATION								% :					
YEARS COMPLETED		9	10	11	12	1	2	3	4	1	2	3	4
DIPLOMA/DEGREE							**.	:			<u></u>		
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 LA	NGU	JAGES	YOU	CAN	SPEA	K, RE	AD AN	ID/OR	WRI	re		33
	FLUE	NT				GO	OD				FAIR		
SPEAK					,								
READ	*****			1									
WRITE				Ш.									
REFERENCE:	S												
Give name, address and telepl previous employers. 1									-				
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23Are you a military veteran?											□ Y	es 🗆	No

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.

661/17/11/11			
COMPANY		_ ADDRESS	
CITY	STATE		_ TELEPHONE
POSITION		_ SUPERVISOR	_TELEPHONE
DATES WORKED FROM:		T0:	
WAGE:	_ REASON FOR LEAVING:		
WORK PERFORMED:			
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COMPANY		ADDRESS	
CITY	STATE		TELEPHONE
POSITION		SUPERVISOR	
DATES WORKED FROM:		TO:	TELEPHONE
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COMPANY		ADDRESS	
COMPANY		ADDRESS	TELEPHONE
CITY	STATE		TELEPHONE
POSITION		_SUPERVIS OR .	
DATES WORKED FROM:		TO:	
WAGE:	REASON FOR LEAVING: _		
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Summarize Special Skills	s and Qualifications		
Minimal IZC Special Skills	ana yuamitanyiis		
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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.

		*3
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_	
Ву		Name and Title	Date	_
Notes				ē

This Application For Employment and Employment Data Record is sold for general use throughout the United States. Amsterdam printing and Litho Corp. assumes no responsibility for the use of said form or any questions which, when asked by the employer of the job applicant may violate State and/or Federal Law.