



APPLICATION FOR EMPLOYMENT

Please return to:
 Village of Westchester
 10300 Roosevelt Road
 Westchester, Illinois 60154
 Fax: (708) 345-2873

INSTRUCTIONS FOR COMPLETING THIS EMPLOYMENT APPLICATION

We welcome you as an applicant for employment for the Village of Westchester. It is the policy and intent of the Village of Westchester to provide equal opportunity in employment to all persons. This policy applies to all types of full-time, part-time, temporary, and seasonal employment. All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible employment with the Village of Westchester.

Please complete the information as requested in this application. Do not submit a resume in place of completing any part of this application, although you are welcome to attach your resume. If you are an individual with a disability and require assistance or accommodation in filling out this application, please contact the Village of Westchester at (708) 345-0020.

Note: the Village of Westchester will not accept applications unless a position has been posted.

Please identify the specific positions(s) from our open job listings for which you are applying.

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<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	Date Available:
<input type="checkbox"/> Temporary <input type="checkbox"/> Summer	Minimum Salary: per _____ hr/ yr

GENERAL INFORMATION

Last Name:		First Name:		Middle Initial:	
Home Phone: ()		Work Phone: ()		Email Address:	
Present Permanent Address:			City:		
State:	Zip Code:	County:	How long lived there?		
Driver's License Number:		State:	Class:	Expiration Date:	
Is this license currently valid? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a valid CDL? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you related to any employee of the Village of Westchester or an elected official? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, state their name and relationship to you:					
Have you ever been previously employed by the Village of Westchester? <input type="checkbox"/> Yes <input type="checkbox"/> No					
When?		In what position?			
Were you referred by a Village of Westchester employee? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, please name the employee:					
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you over 70 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		

EDUCATIONAL INFORMATION

Type of School	Name and Mailing Address of School	Major	Circle Last Year Completed	Degree Earned (If yes, indicate degree)
High School			9 10 11 12	Yes No
College/University			13 14 15 16	Yes No
Graduate				Yes No
Technical/Business /Trade School				Yes No
Other				Yes No

If you are not a high school graduate, have you passed the GED test? Yes No

List any correspondence courses, special courses, seminars, workshops, etc., that might relate to this position:

List any licenses or certificates relating to this position:

List any other skills/experience that relate to this position (Typing, Software Skills, Heavy Machinery, etc.):

List professional, trade, business or civic activities or associations to which you belong. (Please exclude memberships that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.):

EMPLOYMENT HISTORY

Please begin with your present or most recent employer and provide all the information requested. Please do not write, "see resume."

May the Village of Westchester contact your current employer? Yes No

Employer:	Phone Number:
Address:	City: State: Zip:
Dates of Employment:	Reason for Leaving:
Title:	Supervisor's Name:
Ending Salary:	Hours Per Week:
Duties:	
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Employer:	Phone Number:
Address:	City: State: Zip:
Dates of Employment:	Reason for Leaving:
Title:	Supervisor's Name:
Ending Salary:	Hours Per Week:
Duties:	
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Dates of Employment:	Reason for Leaving:
Title:	Supervisor's Name:
Ending Salary:	Hours Per Week:
Duties:	
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PROFESSIONAL REFERENCES:

Please list three references that are familiar with your work history and experience. Do not list relatives, friends or personal references.

Name:	Company:
Business Relationship	Years Known:
Phone Number:	

Name:	Company:
Business Relationship	Years Known:
Phone Number:	

Name:	Company:
Business Relationship	Years Known:
Phone Number:	

APPLICANT AGREEMENT: RELEASE AND CERTIFICATION

Please read before signing. Questions regarding this statement should be directed to any employment interviewer prior to signing.

I hereby certify that all answers to the questions herein are true, accurate and complete to the best of my knowledge. I agree and understand that any false statements, misrepresentations or omissions of fact contained in this application (or any other accompanying or required documents) may cause the rejection of this application or termination of employment without notice or benefits, regardless of how or when discovered. I understand that all candidates hired are subject to satisfactory completion of a probationary period and a post-offer, pre-employment physical exam and drug screen. I authorize the investigation of all statements and information contained in this application. I release the Village of Westchester from any and all liability that might result from conducting a background investigation. I also release from liability anyone supplying information pursuant to such investigation. I understand that this application is not, nor is it intended to be, a contract of employment. If hired, I agree to abide by all applicable Village of Westchester rules and regulations. I acknowledge that I have read the above statements and hereby grant permission to verify the information supplied on this application for employment and employment related documents I have provided

PRINT NAME:

SIGNATURE:

DATE: