

HICKORY HILLS PARK DISTRICT

Application For Employment

HICKORY HILLS PARK DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER. Employment with the Hickory Hills Park District is governed on the basis of merit, competence and qualifications and will not be influenced in any manner by race, age, color, sex, religion, veteran status, national origin, marital status, mental or physical disability or any other legally protected status. THOSE APPLICANTS REQUIRING REASONABLE ACCOMMODATION FOR THE APPLICATION/INTERVIEW PROCESS SHOULD NOTIFY THE PARK DISTRICT OFFICE.

Date of Application: _____ Position Applied For: _____

Name: _____

(Last)

(First)

(Middle)

Address: _____

(Street)

(City)

(State)

(Zip)

Phone Number: _____ Driver's License Number: _____

If you are under 16 years of age, can you furnish a work permit? Yes _____ No _____

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

Are you currently employed? Yes _____ No _____

May we contact your present employer? Yes _____ No _____

Are you legally eligible for employment in this country? Yes _____ No _____

Available for: _____ Part Time Employment _____ Full Time Employment _____ Seasonal

Will you be able to meet the attendance requirements of the position? Yes _____ No _____

Are you willing to work overtime as required? Yes _____ No _____

Date available to begin work: _____

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

REFERENCES

Give name, address and telephone number of three references (21 years of age or older) who are not related to you and are not previous employers.

1. _____

2. _____

3. _____

EDUCATIONAL BACKGROUND

| EDUCATION | SCHOOL Name / Location | Number of Years Completed | MAJOR | Degree / Diploma YES / NO |
|-------------|---------------------------|------------------------------|-------|------------------------------|
| High School | | | | |

EDUCATIONAL BACKGROUND continued:

| EDUCATION | SCHOOL Name / Location | Number of Years Completed | MAJOR | Degree / Diploma YES / NO |
|----------------------------------|-------------------------------|----------------------------------|--------------|----------------------------------|
| College/University | | | | |
| Other Training/ Education | | | | |

The district is required by state statute (70 ILCS 1205/8-23) to obtain criminal conviction information concerning applicants, and shall perform a criminal background check for applicants for all positions, including the position for which you have applied. Applicants are not obligated to disclose sealed or expunged records of convictions. Conviction of offenses enumerated in subsection (c) of said statute shall automatically disqualify the applicant from consideration for employment. All other convictions shall not automatically disqualify the applicant from consideration, but rather, the conviction will be considered in relationship to the specific job.

Have you ever been convicted of a felony? Yes _____ No _____

Have you ever been convicted of a misdemeanor involving dishonesty, criminal sexual conduct, assault or battery, or any criminal drug statute? Yes _____ No _____

If yes, describe: _____

Are you currently serving or have you served in the U.S. Armed Forces (including National Guard or Reserves)?

Date of Duty: _____ Branch of Service: _____

Applicable skills acquired: _____

WORK HISTORY (beginning with the most current employment):

| | | |
|------------------------------|---------------------|-------|
| Most recent employer | Address | Phone |
| Date started | Starting position | |
| Date resigned / terminated | Position on leaving | |
| Name and title of supervisor | | |
| Description of duties | Reason for leaving | |

WORK HISTORY (continued):

| | | |
|------------------------------|---------------------|-------|
| Most recent employer | Address | Phone |
| Date started | Starting position | |
| Date resigned / terminated | Position on leaving | |
| Name and title of supervisor | | |
| Description of duties | Reason for leaving | |

| | | |
|------------------------------|---------------------|-------|
| Most recent employer | Address | Phone |
| Date started | Starting position | |
| Date resigned / terminated | Position on leaving | |
| Name and title of supervisor | | |
| Description of duties | Reason for leaving | |

NOTE: Please explain any gaps in employment: _____

Please list skills, licenses, training, etc. applicable to the position for which you are applying: _____

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE ESSENTIAL REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. YOU MAY OBTAIN A COPY OF THE JOB DESCRIPTION AT THE CYNTHIA NEAL CENTER.

Are you capable of performing in a reasonable and safe manner, with or without reasonable accommodation, the essential job duties for the job or position for which you have applied?

Yes _____ No _____

I CERTIFY THAT ALL INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION AND HEREBY RELEASE AND WAIVE ANY CLAIM AGAINST THE PARK DISTRICT WHICH MAY ALLEGEDLY ARISE FROM SUCH INVESTIGATION. I FURTHER UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE EITHER CONTAINED IN MY APPLICATION OR GIVEN DURING ANY INTERVIEW AND ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATE AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE PARK DISTRICT'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT IS "AT-WILL" AND MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE PARK DISTRICT'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE AT ANY TIME BY THE PARK DISTRICT.

This application for employment shall be considered active for a period of time not to exceed 45 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 understand that if I am hired, I will be required to provide proof of identity and information for compliance with the Immigration Reform and Control Act.

Applicant's Signature: _____ Date: _____

| | |
|--|-------------------|
| FOR OFFICE USE ONLY-DO NOT WRITE IN THIS SPACE | |
| Arrange Interview: Yes _____ No _____ | |
| Date: _____ | Time: _____ |
| Interviewed by: _____ | |
| Position interviewed for: _____ | |
| Starting date: _____ | |
| Pre-employment screenings scheduled? _____ | |
| Hired: Yes _____ No _____ | |
| Pay Rate / Salary \$ _____ | Department: _____ |
| Hired by: _____ | Date: _____ |