



# Application for Employment

Village Hall 708.371.4800  
13840 S. Cicero  
Crestwood, IL 60418 Fax 708.371.4849

**NOTICE TO ALL APPLICANTS:** Proof of citizenship or authorization for employment in the United States is required in accordance with the Immigration and Reform and Control Act of 1986.

**AN EQUAL OPPORTUNITY EMPLOYER** — The Village of Crestwood does not discriminate in hiring or employment on the basis of race, color, religion, national origin, sex, sexual orientation, age, ancestry, marital status, veteran status protected by applicable federal, state or local law.

POSITION(S) APPLIED FOR \* Available Start Date

Are you able to perform the essential functions of the position for which you are applying? Yes No

## PERSONAL CONTACT INFORMATION

Last Name First Name M.I List any other names you have been known by

Street Unit # City State Zip Code  
Home Phone Mobile/Cell E-Mail Best time to contact you? A.M P.M

Are you legally eligible to work in the United States? Yes No  
Are you at least eighteen years of age? Yes No  
Have you ever been employed by the Village of Crestwood? Yes No

*If you have been previously employed by the Village of Crestwood, complete the information below.*

Employment Length Position held and reason for leaving

**Have you ever pleaded guilty, no contest to, or convicted of any misdemeanor or felony?** Yes No

If yes, explain in detail the reason(s), date(s) in the Comments section at the end of this application.

*Answering "Yes" does not constitute an automatic bar to employment. Factors such as age at the date of the offense, nature of the violation and rehabilitation will be taken into account. Do not include minor traffic citations, and arrests or convictions which have been sealed or expunged when answering this question.*

Have you ever served in a branch of the military? *If yes, please complete the information below.*

Dates of Service Position Held Type of Discharge

Do you have adequate transportation to and from work?

Valid Driver's License? Yes No Driver's License #:

## EDUCATION AND SKILLS

High School Name

List Diploma or GED

City

State

Completion Date

Secondary / College / Vocational Training

Course of Study/Major

City

State

List Diploma or Degree Achieved

Completion Date

Secondary / College / Vocational Training

Course of Study/Major

City

State

List Diploma or Degree Achieved

Completion Date

Do you hold any license, registration, or certification required by or related to the position(s) for which you are applying?

Type

Issued By

Expiration

Number

Type

Issued By

Expiration

Number

Describe your computer experience, including all software applications.

List any special skills or equipment you can operate.

## WORK EXPERIENCE

Complete the information below for your last four employers, starting with the most recent employer first.

Position	Employer/Company Name	Length of Employment	Full Time	Part Time
Employer Address	City	State	Zip Code	Other
Describe your major duties and reason(s) for leaving.		May we contact this employer?		
		Yes	No	

Position	Employer/Company Name	Length of Employment	Full Time	Part Time
Employer Address	City	State	Zip Code	Other
Describe your major duties and reason(s) for leaving.		May we contact this employer?		
		Yes	No	

Position	Employer/Company Name	Length of Employment	Full Time	Part Time
Employer Address	City	State	Zip Code	Other
Describe your major duties and reason(s) for leaving.		May we contact this employer?		
		Yes	No	

Position	Employer/Company Name	Length of Employment	Full Time	Part Time
Employer Address	City	State	Zip Code	Other
Describe your major duties and reason(s) for leaving.		May we contact this employer?		
		Yes	No	

**Have you ever been terminated, or asked to resign from a job?**      **Yes**      **No**

*If yes, please explain any gaps in your employment history in the comments section below.*



I certify that the information provided in this Application for Employment (and accompanying resume, if any) is true and correct to the best of my knowledge. I understand that any misrepresentation, omission, or falsification of information contained in this Application (or accompanying resume) will be cause for the denial of my application and constitute grounds for immediate dismissal from any subsequent employment with the Village of Crestwood. *Check the box and place your initials here indicating that you so certify and understand:*

I understand that this application does not constitute an employment contract or an offer of employment. In consideration of my employment, I agree to conform to the rules and regulations of the Village of Crestwood. *Check the box and place your initials here indicating that you understand and agree:*

In further consideration of my employment, I understand and agree that my employment is contingent upon successful completion of a pre-employment physical including a drug screen, criminal background investigation and reference checks. *Check the box and place your initials here indicating that you understand and agree:*

I hereby authorize persons, schools, and/or previous employers named in this application (and accompanying resume, if any) to provide the Village of Crestwood with all records and information regarding employment with them, and I release all individuals, partnerships, associations or corporations from any and all liability, claims or damages that may result from the use, disclosure or release of such information. *Check the box and place your initials here indicating that you so certify and understand:*

I understand that at any time during my employment, the Village may require me to submit to a physical examination, drug and/or alcohol test to the extent permitted by law. I consent to the disclosure of the results of any physical examination or related testing including drug and alcohol testing to the Village. I also understand that I may be required to take other tests such as personality and honesty tests prior to and during my employment and I consent to all such testing. I understand that if I should decline to sign this consent or decline to take such tests, my application for employment may be rejected or my employment terminated. *Check the box and place your initials here indicating that you understand and consent:*

I certify that I have read the foregoing paragraphs.

Signature

Date