

EMPLOYMENT APPLICATION

The Village of Wauconda IS AN EQUAL OPPORTUNITY EMPLOYER. Employment with the Village of Wauconda 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 legal protected status.

All information contained in or connected with this application will be considered confidential and used only in conjunction with possible employment with the Village of Wauconda. Please furnish complete information as outlined in this application.

THOSE APPLICANTS REQUIRING REASONABLE ACCOMMODATION TO THE APPLICATION/INTERVIEW PROCESS SHOULD NOTIFY THE HUMAN RESOURCE OFFICE. ALL APPLICATIONS SHOULD BE RETURNED TO THE VILLAGE OF WAUCONDA, HR OFFICE.

Date of Application:			
			
Applicant's Name	-		
Last:	First:	Middle:	
Applicant's Address			
Street:	City:	State:	Zip:
Home Phone#:	Cell Phone#:		
Email Address:			
Have you submitted an app	lication to the Village in the past? \Box	Yes □ No If yes, g	give date:
Have you been employed w	vith the Village in the past? ☐ Yes	□ No If yes, give da	ite:
Are you currently employed	? □ Yes □ No		
May we contact your presen	nt employer? ☐ Yes ☐ No		
Are you legally eligible for e	employment in this country? □ Yes	□ No	
Are you willing to work over	rtime as required? ☐ Yes ☐ No		
Position Applying For:			
Date Available to begin wor	k:		
Are you currently on "lay-of	f' status and subject to recall? □ Ves	□ No	



EDUCATIONAL BACKGROUND:

High School Name: City, State: Years Completed: Diploma? Yes No College/University: City, State: Years Completed: Major: Diploma? Yes No Other Education: City, State: Yes No Other Education: City, State: Yes No Other Education: Diploma? Yes No Other Education: City, State: Yes No Other Education: Diploma? Yes No Other Training/Certifications: City, State: Yes No Other Training/Certifications: City, State: Yes No

Other Training/Certifications: _____ City, State: _____

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Years Completed: Diploma/Certificate? ☐ Yes ☐ No

Years Completed: Diploma/Certificate? ☐ Yes ☐ No



BACKGROUND:

The Village is required by law 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.

Have you ever been convicted of a felony? ☐ Ye	es □ No
Have you ever been convicted of a misdemeanor	r involving dishonesty, criminal sexual conduct, assault or
battery, or any criminal drug statute? \square Yes \square	No
If yes, describe:	
MILITARY SERVICE:	
For the information you list below to be considered	ed, you must supply a copy of your 00214.
Have you served in the U.S. Armed Forces - inclu	uding National Guard or Reserves? ☐ Yes ☐ No
If yes, Branch of Service:	Dates of Service:
Applicable skills acquired:	



WORK HISTORY (beginning with most recent employer):

Most Recent Employer:	Telephone:	
Address:	City:	State:
Date Started:	Starting Position:	
Last Date Employed:	Ending Position:	
Name and Title of Supervisor:		
Description of Duties:		
Reason for Leaving:		
Employer:	Telephone	e:
Address:	City:	State:
Date Started:	Starting Position:	
Last Date Employed:	Ending Position:	
Name and Title of Supervisor:		
Reason for Leaving:		
Employer:	Telephone	9:
Address:	City:	State:
Date Started:	Starting Position:	
Last Date Employed:	Ending Position:	
Name and Title of Supervisor:		
Reason for Leaving:		



Employer:	Telep	hone:
Address:	City:	State:
Date Started:	Starting Position:	
_ast Date Employed:		
Name and Title of Supervisor:		
Description of Duties:		
Reason for Leaving:		
Please list skills, licenses, training, etc.		
Note to Applicants: DO NOT answer this		rmed about the essentia
requirements of the job for which you ar	e applying. You may obtain a copy of	the job description at th

Human Resource office at the Village Hall.

Are you capable or 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

Fax: 847-526-8809



EMPLOYMENT REFERENCES:

Please list the following information for three references *not related to you* that we may contact:

		Past Employer	Otner
	Telephone: _		
City:		_ State: Zip	Code:
		Deat Swales	Ollegan
City:		_ State: Zip	Code:
		Past Employer	Other
	City:	City: Telephone:	Telephone:State: Zip



APPLICANT'S CERTIFICATION AND AGREEMENT:

I CERTIFY THAT ALL OF THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE. 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 VILLAGE OF WAUCONDA 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 TERMINATED AT ANY TIME. I AGREE TO CONFORM TO THE VILLAGE OF WAUCONDA'S PERSONNEL POLICIES, PROCEDURES, RULES AND REGULATIONS. I AGREE THAT MY EMPLOYMENT IS "AT-WILL" AND MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, WITH OR WITHOUT NOTICE AND/OR BY COLLECTIVE BARGAINING AGREEMENT, AT ANY TIME, AT EITHER MY OR THE VILLAGE'S OPTION.

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	
	- DO NOT WRITE IN THIS SPACE		
FOR OFFICE USE ONLY	- DO NOT WRITE IN THIS SPACE	=	
Interview Scheduled: ☐ Ye	s □ No If yes, date:		
Interviewed by:			
Position Interviewed for:			
Hired: ☐ Yes ☐ No			
Hired By:	Date:		
Are Pre-Employment Scree	enings Scheduled? ☐ Yes ☐ No		
Position Starting Date:			
Pay Rate/Salary:	Department:		