



Village of Carbon Cliff
1001 Mansur Avenue
Carbon Cliff, Illinois 61239
Phone: (309) 792-8235

Employment Application
An Equal Opportunity / Affirmative Action Employer

APPLICANT INFORMATION

Full Name: Last First M.I.

Address: Street Address Apartment / Unit / P.O. Box #

City State ZIP Code

Home Phone: () Cell phone: ()

E-mail Address:

Birth Date (Optional):

Emergency Contact: (Name / Phone)

Citizenship: I certify that I am either:

- a U.S. Citizen
a non-citizen with permanent work authorization; or
a non-citizen with a renewable work authorization

If hired, you will be required to complete the Employment Eligibility Verification form (INS Form I-9) and present for review documentation evidencing employment authorization in the United States.

Have you ever been convicted of a felony? YES NO

If yes, explain:

Under Illinois law, job applicants are not obligated to disclose sealed or expunged records of conviction or arrest.

POSITION DESIRED

Position Applied for

Desired Salary/Wages: \$ Date you can start:

Have you ever worked for the Village of Carbon Cliff? YES NO

If yes, when?

Have you ever applied to the Village of Carbon Cliff before? YES NO

If yes, when?

Are you employed now? YES NO May we question your current employer? YES NO

EMPLOYMENT HISTORY

Company: _____

Address: _____

Phone: ____ (____) _____ Supervisor: _____

Job Title / Responsibilities: _____

Ending Salary/Wages: \$ _____ Start Date: _____ End Date: _____

Reason for Leaving: _____

Company: _____

Address: _____

Phone: ____ (____) _____ Supervisor: _____

Job Title / Responsibilities: _____

Ending Salary/Wages: \$ _____ Start Date: _____ End Date: _____

Reason for Leaving: _____

Company: _____

Address: _____

Phone: ____ (____) _____ Supervisor: _____

Job Title / Responsibilities: _____

Ending Salary/Wages: \$ _____ Start Date: _____ End Date: _____

Reason for Leaving: _____

Company: _____

Address: _____

Phone: ____ (____) _____ Supervisor: _____

Job Title / Responsibilities: _____

Ending Salary/Wages: \$ _____ Start Date: _____ End Date: _____

Reason for Leaving: _____

EDUCATION

College: _____

Address: _____

Degree / Course: _____ Did you Graduate? YES NO

High School: _____

Address: _____

Degree / Course: _____ Did you Graduate? YES NO

Other: _____

Address: _____

Degree / Course: _____ Did you Graduate? YES NO

Other: _____

Address: _____

Degree / Course: _____ Did you Graduate? YES NO

MILITARY SERVICE

Branch of Military: _____

Years of Service: From _____ To _____

Rank at time of Discharge: _____ Type of Discharge: _____

If other than Honorable, explain: _____

REFERENCES

Please list three professional references, not related to you, which you have known for at least one year

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment / Unit / P.O. Box #

City State ZIP Code

Home Phone: ____ (____) _____ Cell phone: ____ (____) _____

Occupation: _____ Years you have known this individual: _____

REFERENCES (continued)

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment / Unit / P.O. Box #*

_____ *City* *State* *ZIP Code*

Home Phone: ____ (____) _____ Cell phone: ____ (____) _____

Occupation: _____ Years you have known this individual: _____

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment / Unit / P.O. Box #*

_____ *City* *State* *ZIP Code*

Home Phone: ____ (____) _____ Cell phone: ____ (____) _____

Occupation: _____ Years you have known this individual: _____

DISCLAIMER & SIGNATURE

I am aware that former employers (and my present employer, if I so indicate), and educational institutions may be contacted for verification and evaluation, and herewith authorize all parties contacted to provide any information requested. I am also aware that other background checks and investigations may be made. I understand that any position rendered me by the Village of Carbon Cliff will be contingent upon the information contained in this application, possibly supplemented by other verification and that any false statements or willful withholding of information in filling out this application will be cause for termination of consideration for employment or, if discovered after employment, may be cause for immediate discharge or other disciplinary action.

I hereby certify that the information on this application is true and accurate to the best of my knowledge and belief.

Written Signature _____ Date: _____

-- All applications must have original signature and date. --



Revised:
Tuesday, November 03, 2015