Blue Island Park District APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability or any other characteristic that is currently protected by applicable law. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors. Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application.

Answer each question fully and a not have enough room on this ap					uestions. Use blank p	aper if you do	
Job applied for		•	•	• •			
Are you seeking: Full-time □	Part-time □	Seasonal □	employment?	When could you start w			
Last Name	First Name		Middle Name	Talanhana Ni	um h o r		
Last Name	riisi ivame		Middle Name	Telephone Nu	umber		
Present Street Address			City	State	Zip (Zip Code	
E-mail Address Are you 18 years of age or older?	? (If you are hired,	you may be requ	ired to submit proof	of age.)	Yes D] No □	
Social Security Number(Optional)	_ If hired, can	you furnish proof yo	u are eligible to work in the	U.S.? Yes E] No □	
		No El Korro					
Have you ever applied here before							
Were you ever employed here?	Yes □	•	·-				
Have you ever been convicted of	•		•		Yes D] No □	
If yes, give details							
(A "yes" answer does not automa considered.)	itically disqualify y	ou from employm	ent, since the nature	of the offense and the job	for which you are app	olying is also	
Are you now or do you expect to be engaged in any other business or employment?					Yes D] No □	
If yes, please explain_							
For driving jobs <u>ONLY</u> : Do you have a valid driver's license?					Yes D] No □	
Driver's License Number Class of License							
Have you had your driver's license suspended or revoked in the last 3 years?					Yes D] No □	
If yes, give details							
List professional, trade, business national origin, sex, age, disability						lor, religion,	
				Niverbound	Dialogo		
LIST NAME AND ADDRESS OF	SCHOOLS			Number of Years Completed	Diploma/ Degree/ Certificate	Subjects Studied	
High School or GED							
College or University							
Vocational or Technical							
What skills or additional training of	do you have that r	relate to the job for	r which you are appl	ying?			
What machines or equipment car	n you operate that	relate to the job f	or which you are ap	olying?			

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers. **EMPLOYER** ADDRESS PHONE NUMBER SUPERVISOR JOB TITLE AND DUTIES DATES OF EMPLOYMENT (Mo/Yr) FROM TO REASON FOR LEAVING **EMPLOYER** ADDRESS _____PHONE NUMBER____ SUPERVISOR___ JOB TITLE AND DUTIES DATES OF EMPLOYMENT (Mo/Yr) FROM REASON FOR LEAVING______ **EMPLOYER** ADDRESS_____ PHONE NUMBER SUPERVISOR JOB TITLE AND DUTIES____ ____DATES OF EMPLOYMENT (Mo/Yr) FROM TO REASON FOR LEAVING_____ Have you worked or attended school under any other name? Yes □ № П If yes, give names:_ Are you presently employed? Yes □ № П If yes, whom do you suggest we contact?_____ Have you ever been fired from a job or asked to resign? No □ If yes, please explain: Have you ever been written up or disciplined by a prior employer for any reason? Yes □ No □ If yes, please explain:_ Give three references, not relatives or former employers. Name Address Phone PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further

consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying. I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post employment drug screen as a condition of employment, if required. I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE. I have read, understand and by my signature consent to these statements.

Signature:	Date:	