



APPLICATION FOR EMPLOYMENT

[PRE-EMPLOYMENT QUESTIONNAIRE] [AN EQUAL OPPORTUNITY EMPLOYER]

PERSONAL INFORMATION

DATE: _____

LAST NAME: _____ FIRST NAME: _____ MI: _____

PRESENT ADDRESS: _____

STREET CITY STATE ZIP

PERMANENT ADDRESS: _____

STREET CITY STATE ZIP

PHONE NUMBER: _____ ARE YOU 18 YEARS OF AGE OR OLDER? _____

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO

EMPLOYMENT DESIRED

POSITION: _____ AVAILABLE START DATE: _____ DESIRED SALARY: _____

ARE YOU CURRENTLY EMPLOYED? IF SO, MAY WE CONTACT YOUR EMPLOYER? _____

HAVE YOU APPLIED AT THE VILLAGE OF SHILOH BEFORE? IF SO, WHEN? _____

REFERRED BY: _____

| EDUCATION | NAME AND LOCATION OF SCHOOL | NUMBER OF YEARS ATTENDED | WHAT YEAR DID YOU GRADUATE? | SUBJECTS STUDIED |
|---|-----------------------------|--------------------------|-----------------------------|------------------|
| GRAMMAR SCHOOL | | | | |
| HIGH SCHOOL | | | | |
| COLLEGE | | | | |
| TRADE,BUSINESS OR CORRESPONDENCE SCHOOL | | | | |

This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991.



GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:

SPECIAL SKILLS:

ACTIVITIES (CIVIC, ATHLETIC, ETC.):

EXCLUDE ORGANIZATIONS THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS.

**U.S. MILITARY OR
NAVAL SERVICE**

RANK

**PRESENT MEMBERSHIP IN
NATIONAL GUARD OR RESERVES**

FORMER EMPLOYERS: LIST THE LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT

| DATES OF SERVICE MONTH AND YEAR | NAME, ADDRESS, PHONE NUMBER AND EMAIL OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|--|--|--------|----------|--------------------|
| FROM: ____/____/____ TO: ____/____/____ | | | | |
| FROM: ____/____/____ TO: ____/____/____ | | | | |
| FROM: ____/____/____ TO: ____/____/____ | | | | |

REFERENCES: LIST NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

| NAME | PHONE NUMBER AND EMAIL ADDRESS | PROFESSION | NUMBER OF YEARS ACQUAINTED |
|------|--------------------------------|------------|----------------------------------|
| | | | |
| | | | |
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"I CERTIFY THAT ALL OF THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE VILLAGE'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE AT ANY TIME, AT EITHER MY OR THE VILLAGE'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 VILLAGE.

DATE **SIGNATURE**

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: **DATE**

REMARKS:

NEATNESS **ABILITY**

HIRED **YES** **NO** **POSITION** **DEPT.**

SALARY/WAGE **DATE REPORTING TO WORK**

APPROVED

DEPARTMENT MANAGER **VILLAGE ADMINISTRATOR**

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