

# Application for Employment



NORRIDGE PARK DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER. Employment with the Norridge Park District 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 legally protected status. THOSE APPLICANTS REQUIRING REASONABLE ACCOMODATION TO THE APPLICATION / INTERVIEW PROCESS SHOULD NOTIFY THE HUMAN RESOURCE MANAGER.

Date of Application: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Driver's License # \_\_\_\_\_ (If driving is an essential job function.)

If you are under 16 years of age and it is required, can you furnish a work permit? \_\_\_ Yes \_\_\_ No

Have you submitted an application here before? \_\_\_ Yes \_\_\_ No

Have you ever been employed with us before? \_\_\_ Yes \_\_\_ No

If Yes, give dates \_\_\_\_\_

Are you currently employed? \_\_\_ Yes \_\_\_ No

May we contact your present employer? \_\_\_ Yes \_\_\_ No

Are you legally eligible for employment in the USA? \_\_\_ Yes \_\_\_ No

## Application for (check applicable):

\_\_\_\_\_ Parks Department \_\_\_\_\_ Early Care / Preschool

\_\_\_\_\_ Recreation Department \_\_\_\_\_ Pool / Fitness Center

Position applied for: \_\_\_\_\_

Type of Work Desired: \_\_\_ Part Time Employment \_\_\_ Full Time Employment \_\_\_ Seasonal (90 days or less)

Will you be able to meet the attendance requirements of the position? \_\_\_ Yes \_\_\_ No

Are you willing to work overtime as required? \_\_\_\_\_ Yes \_\_\_\_\_ No

Date available to begin work: \_\_\_\_\_

Are you currently on "lay-off" status and subject to recall? \_\_\_ Yes \_\_\_ No

Have you ever been convicted of any felony? \_\_\_\_\_ YES \_\_\_\_\_ NO.

Have you ever been convicted of a misdemeanor involving dishonesty, criminal sexual conduct, assault or battery, or any criminal drug statute? \_\_\_\_\_ YES \_\_\_\_\_ NO.

If yes, describe: \_\_\_\_\_

The district is required by state statute (70 ILCS 1205/8-23) 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. Conviction of offenses enumerated in subsection (c) of said statute shall automatically disqualify the applicant from consideration for working for the district. All other convictions shall not automatically disqualify the applicant from consideration, but rather, the conviction will be considered in relationship to the specific job.

Have you served in the U. S. Armed Forces (include National Guard or Reserves)? \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, dates of duty: \_\_\_\_\_ Branch of service: \_\_\_\_\_

Applicable skills acquired: \_\_\_\_\_

## EDUCATIONAL BACKGROUND

EDUCATION	SCHOOL Name/Location	Number of Years Completed	Major	Degree/Diploma
High School				
College/University				
Other Training, Education				

## EMPLOYMENT EXPERIENCE

_____	_____	_____
Most recent employer	Address	Phone
_____	_____	_____
Date started	Starting Salary	Starting Position
_____	_____	_____
Date left	Salary on leaving	Position on leaving
_____	_____	_____
Name and title of supervisor	_____	
_____	_____	
Description of duties	Reason for leaving	

Employer	Address	Phone
Date started	Starting Salary	Starting Position
Date left	Salary on leaving	Position on leaving
Name and title of supervisor		
Description of duties		Reason for leaving

Employer	Address	Phone
Date started	Starting Salary	Starting Position
Date left	Salary on leaving	Position on leaving
Name and title of supervisor		
Description of duties		Reason for leaving

**NOTE: Please explain any gaps in employment.**

**SKILLS & QUALIFICATIONS**

Please list any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

**Note to Applicants:**

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE ESSENTIAL REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. YOU MAY OBTAIN A COPY OF THE JOB DESCRIPTION AT THE OFFICE.

Are you capable of performing in a reasonable and safe manner, with or without reasonable accomodation, the essential job duties for the job or position for which you have applied?

Yes \_\_\_ No \_\_\_

# REFERENCES

PLEASE LIST THE NAME AND PHONE NUMBER OF THREE REFERENCES, NOT RELATED TO YOU, THAT WE MAY CONTACT.

Name (and Title, if applicable)	Relationship to You	Telephone	Years Known
1			
2			
3			

## APPLICANT'S CERTIFICATION AND AGREEMENT

*I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND 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 PARK DISTRICT 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. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE PARK DISTRICT'S RULES AND REGULATIONS AND I AGREE THAT MY EMPLOYMENT IS "AT-WILL" AND MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANYTIME, AT EITHER MY OR THE PARK DISTRICT'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITION OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE AT ANY TIME BY THE PARK DISTRICT.*

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 \_\_\_\_\_

**FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE**

Arrange Interview: \_\_\_\_\_ YES \_\_\_\_\_ NO

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Interviewed by: \_\_\_\_\_

Position interviewed for: \_\_\_\_\_

Starting date: \_\_\_\_\_

Pre-employment screenings scheduled? \_\_\_\_\_

Hired? \_\_\_\_\_ YES \_\_\_\_\_ NO      Position: \_\_\_\_\_

Pay Rate/Salary: \$ \_\_\_\_\_ Department: \_\_\_\_\_

Hired by: \_\_\_\_\_ Date: \_\_\_\_\_