

APPLICATION FOR EMPLOYMENT

Please return to the Human Resources Division of the Village Manager's Office

Village of Orland Park
14700 Ravinia Avenue
Orland Park, IL 60462
(708) 403-6100

“An Equal Opportunity Employer”

We welcome you as an applicant for employment. Your application will be considered with others in competition for all positions without regard to race, color, religion, sex, national origin, age, ancestry, disability, or other legally protected status, in accordance with all applicable legal requirements. The Village of Orland Park is subject to and complies with The Drug Free Workplace Act of the State of Illinois, and we require pre-employment substance abuse screening and follow-up screening based on reasonable suspicion.

1. Position applied for _____ Date of application _____
2. Minimum salary or hourly rate required _____ per _____ Date available _____
3. Check one: Full-Time Part-Time Seasonal Temporary
4. How did you learn of this opening? _____

PERSONAL INFORMATION

5. Name _____
Last First Middle
6. For purposes of checking applicant's employment records, indicate any changes in name, assumed name or nicknames used:

7. Present address _____
City State Zip Code
8. Home (_____) _____ Cell (_____) _____
9. E-mail address _____
10. Do you have a valid Drivers License? Yes No
Drivers License Number _____ State _____ Type _____ Class _____
11. Are you legally eligible for employment in the United States? Yes No
12. If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No
13. Have you been convicted of a felony in the past seven (7) years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court? (Conviction will not necessarily disqualify an applicant from employment and factors such as age and time of offense, seriousness and nature of the violation and rehabilitation may be taken into account.)
 Yes No If “Yes”, describe in full, where convicted and disposition of the case.

14. Are you willing to participate in pre-employment testing related to the position applied for? Yes No

EMPLOYMENT HISTORY

15. Have you ever worked for the Village of Orland Park? Yes No

If "Yes", provide details under employment history.

16. Have you ever applied for a position with the Village of Orland Park before? Yes No

If "Yes", when? _____ Position _____

17. Do you have any relatives that are currently employed by the Village of Orland Park? Yes No

If "Yes", provide their name and department _____

18a. **Company Name:** _____

Address: _____

Name of Supervisor: _____

State job title and describe your work: _____

Telephone: (____) _____

Employed: (month and year)

From: _____ To: _____

Current/Last Salary:

Reason for Leaving:

18b. **Company Name:** _____

Address: _____

Name of Supervisor: _____

State job title and describe your work: _____

Telephone: (____) _____

Employed: (month and year)

From: _____ To: _____

Current/Last Salary:

Reason for Leaving:

18c. **Company Name:** _____

Address: _____

Name of Supervisor: _____

State job title and describe your work: _____

Telephone: (____) _____

Employed: (month and year)

From: _____ To: _____

Current/Last Salary:

Reason for Leaving:

18d. Company Name: _____ Address: _____ _____ Name of Supervisor: _____ State job title and describe your work: _____ _____ _____ _____	Telephone: (____) _____ Employed: (month and year) From: _____ To: _____ Current/Last Salary: _____ Reason for Leaving: _____ _____ _____
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We may contact the employers listed above unless you indicate those you do not want us to contact.

Do not contact: Employer Name _____ Reason _____ _____
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19. MILITARY SERVICE RECORD

Did you serve in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", in what Branch _____ Rank _____

20. EDUCATION, TRAINING AND EXPERIENCE

School	Name and Address	No. of Years/ Credit Hours	Did you Graduate?	Degree or Diploma
High School	1. _____ _____			
	2. _____ _____			
College	1. _____ _____			
	2. _____ _____			
Vocational/ Business	1. _____ _____			
	2. _____ _____			

21. OTHER TRAINING AND EXPERIENCE

School	Name and Address	No. of Years/ Credit Hours	Did you Graduate?	Degree or Diploma
	1. _____ _____			
	2. _____ _____			

22. List your participation in any correspondence courses, seminars, workshops, training sessions, etc., that might relate to this position. Exclude those activities which indicate any legally protected status.

23. SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment and experience. Exclude those activities which indicate any legally protected status.

24. Professional License/Certification (i.e., teacher, nurse, physician, etc.) _____

Date issued _____ Issuing State _____ License/Certificate Number _____

Has your License/Certification ever been revoked? Yes No

If "Yes" state reason(s), date of revocation and date of reinstatement. _____

25. REFERENCES

List below three persons you have known, preferably professionally, at least one year. Do not list relatives or former employers already listed.

NAME: _____ NUMBER OF YEARS KNOWN: _____ ADDRESS: _____ BUSINESS TELEPHONE NUMBER: _____ OCCUPATION: _____
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NAME: _____ NUMBER OF YEARS KNOWN: _____ ADDRESS: _____ BUSINESS TELEPHONE NUMBER: _____ OCCUPATION: _____

Use this space for additional information which you believe qualifies you for the position for which you are applying. Precede each answer with the number of the referenced question.

26. APPLICANT'S STATEMENT

I UNDERSTAND AND AGREE THAT:

I hereby certify that I have not knowingly withheld any information that might adversely affect my application for employment and that the answers given by me are true, correct and complete to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission, misstatement or falsification of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. In consideration of my employment, I agree to conform to all rules, regulations and policies which the Village of Orland Park may periodically promulgate, withdraw or modify.

I hereby authorize the Village of Orland Park, any consumer reporting agency, or other outside persons or companies utilized by the Village of Orland Park for this purpose, now or subsequently, to obtain, prepare, use and furnish information concerning my references, work record, education and other matters related to my suitability for employment and, further, authorize my former employers to disclose to the Village any and all letters, reports and other information related to my work record, without giving me prior notice of such disclosure. In addition, I hereby release the Village, my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigations or disclosure.

I understand and agree that I may be required to take a physical examination (after an offer of employment) at the Village of Orland Park's expense, as a condition of employment. I authorize any physician or any hospital to release any information which may be necessary to determine my ability to perform the essential functions of a job for which I am being considered for employment with the Village of Orland Park.

I understand that nothing communicated during the employment process contained in the application or conveyed during any interview which may be granted is intended to create an employment contract between me and the Village. I further understand that acceptance of employment does not create a contractual obligation upon the Village to continue to employ me in the future.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "AT WILL" nature, which means that the employee may resign at any time and the employer may discharge employee(s) at any time with or without cause. It is further understood that the "AT WILL" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Village Manager.

My signature below confirms that I have read and understand the above statements.

Signed _____ Date _____
(Applicant Signature)