



Employment Application

Applicant Information															
Full Name:						Date:									
<i>Last</i>				<i>First</i>				<i>M.I.</i>							
Address:															
<i>Street Address</i>						<i>Apartment/Unit #</i>									
<i>City</i>						<i>State</i>			<i>Zip Code</i>						
Phone:		()				E-mail Address:									
Date Available:			Desired Salary:			\$									
Position Applied for:															
Are you a U.S. citizen?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>		NO <input type="checkbox"/>	
Have you ever worked for this company?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, when?							
Have you ever been convicted of a felony?				YES <input type="checkbox"/>		NO <input type="checkbox"/>									
If yes, explain:															
Education															
High School:				Address:											
From:		To:		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree:					
University				Address:											
From:		To:		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree:					
Other:				Address:											
From:		To:		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree:					
References															
<i>Please list three professional references.</i>															
Full Name:				Relationship:											
Company:						Phone:		()							
Address:															
Full Name:				Relationship:											
Company:						Phone:		()							
Address:															
Full Name:				Relationship:											
Company:						Phone:		()							
Address:															

Previous Employment

Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	
May we contact your previous supervisor for a reference?	YES	NO			
	<input type="checkbox"/>	<input type="checkbox"/>			
Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	
May we contact your previous supervisor for a reference?	YES	NO			
	<input type="checkbox"/>	<input type="checkbox"/>			
Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	
May we contact your previous supervisor for a reference?	YES	NO			
	<input type="checkbox"/>	<input type="checkbox"/>			

Additional Information, Disclaimer and Signature

1. Have you ever been a member of the armed forces? **Yes** **No**

If yes, did your military experience have any relationship to the position for which you are applying? **Yes** **No**

2. Have you ever been dismissed or asked to resign from a position? **Yes** **No**

If yes, please explain below or in an attachment. This is not intended to include layoffs that result from a reduction in force or company shut-down.

3. Have you ever pleaded guilty to or been convicted of a felony or other serious crime?

Yes No

If yes, please provide details below or in an attachment. Applicants for employment are not obligated to disclose sealed or expunged records of conviction or arrest. A conviction record will not necessarily bar you from employment; the nature, recentness, and disposition of an offense will be considered as it relates to the job for which you are applying. It is the practice of the College to conduct criminal background checks for certain positions in compliance with *Illinois Public Act 88-629*.

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date:

Please let us know what hours you are available:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday: