



**Special Skills:**

Summarize your special skills or qualifications:

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**References**

List two personal references who are not relatives.

(Name)	(Address)	(Telephone)	(Relationship)

**Employment**

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary & Title: \_\_\_\_\_ Ending Salary & Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary & Title: \_\_\_\_\_ Ending Salary & Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary & Title: \_\_\_\_\_ Ending Salary & Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary & Title: \_\_\_\_\_ Ending Salary & Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

**Applicant Waiver**

All job applicants must sign and submit with application form

I hereby certify that the information herunder is correct to the best of my knowledge and understand that falsification of this information is grounds for refusal to hire or, if hired, dismissal.

I hereby authorize any of the persons or organizations listed in my application to give all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and release all such parties from all liability that may result from furnishing such information to you. I authorize the Flagg-Rochelle Community Park District to request and receive such information.

In consideration for my employment and my being considered for employment by the Flagg-Rochelle Community Park District, I agree to adhere to the rules and regulations of the company and hereby acknowledge that these rules and regulations may be changed by the Flagg-Rochelle Community Park District at any time, at the company's sole option and without any prior notice. In addition, if such is made, may be withdrawn, with or without prior notice, at any time, at the option of either the company or myself.

I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to assure or make some other personnel move, either prior to commencement of employment or after I have become employed, or to assure any benefits or terms and conditions of employment, or to make any agreement, that is contrary to the foregoing.

I hereby acknowledge that I have been advised that this application will remain active for no more than 90 days from the date it was signed.

Applicant: \_\_\_\_\_

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

Company  
Representative: \_\_\_\_\_

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