



**Employment Application**

<p><b>THE FLAGG-ROCHELLE COMMUNITY PARK DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER.</b> Employment with the Flagg-Rochelle Community 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, sexual orientation, veteran status, national origin, marital status, mental or physical disability or any other legally protected status.</p>	<p><b>Date Received:</b></p> <p>____/____/____</p>
<p><i>APPLICANTS REQUIRING REASONABLE ACCOMMODATION FOR THE APPLICATION/INTERVIEW PROCESS SHOULD NOTIFY THE PARK DISTRICT OFFICE.</i></p>	

**Applicant Information**

Full Name: \_\_\_\_\_  
*Last*
*First*
*M.I.*

Address: \_\_\_\_\_  
*Street Address*
*Apartment/Unit #*

\_\_\_\_\_ *City*
*State*
*ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If you are under 16 years of age, and it is required, can you furnish a work permit? YES  NO  Social Security #: \_\_\_\_\_

Have you submitted an application here before? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been employed with us before? YES  NO  If yes, when? \_\_\_\_\_

Are you currently employed? YES  NO  May we contact your present employer? YES  NO

Are you legally eligible for employment in this country? YES  NO

Application for (check applicable)

- |                                                 |                                                    |
|-------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Maintenance Department | <input type="checkbox"/> Administrative Department |
| <input type="checkbox"/> Recreation Department  | <input type="checkbox"/> Other                     |

Available for:  Part Time Employment  Full Time Employment  Seasonal Employment

Will you be able to meet the attendance requirements of the position? YES  NO  Are you willing to work overtime as required? YES  NO

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

Desired salary/wage: \_\_\_\_\_ Date available to start: \_\_\_\_\_

Are you currently on 'lay-off' status and subject to recall? YES  NO

**Educational Background**

*Please fill in below:*

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

Have you ever been convicted of a 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

The district is required by state statute (70 ILCS 1205/8-23) to obtain criminal conviction information concerning applicants offered employment, 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. Pursuant to section 8-23 of said statute, certain convictions 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.

If yes, explain:

Have you ever served in the U.S. Armed Forces? (including National Guard or Reserves) YES  NO  Date of Duty: \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Applicable skills acquired: \_\_\_\_\_

**Previous Employment**

Company & Position: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Salary on Leaving: \_\_\_\_\_

May we contact your supervisor for a reference?      YES      NO  
                                                                                      

Company & Position: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Salary on Leaving: \_\_\_\_\_

May we contact your supervisor for a reference?      YES      NO  
                                                                                      

Company & Position: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Salary on Leaving: \_\_\_\_\_

May we contact your supervisor for a reference?      YES      NO  
                                                                                      

Please explain any gaps in employment: \_\_\_\_\_

### Additional Information

Please list skills, licenses, training, etc. applicable to the position for which you are applying:

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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 PARK OFFICE OR ONLINE.**

Are you capable of performing in a reasonable and safe manner, with or without reasonable accommodation, the essential job duties for the job or position for which you have applied?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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### References

Please list the name, address, and phone number of 3 references, not related to you, that we may contact.

Full  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

Full  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

Full  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

### 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 any time, 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: \_\_\_\_\_