

# APPLICATION FOR EMPLOYMENT

**City of Geneseo, 115 S. Oakwood Ave., Geneseo, IL 61254**

*All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, sexual orientation, medical condition or disability, or any other status protected by law. We are an Equal Opportunity Employer.*

Please print in ink. You must complete entire application

Date:

## Applicant Information

Name (first, middle, last)			
Address (street, city, state, zip code)		Day Telephone (    )	
Social Security #		Evening Telephone (    )	
Are there other names under which you have worked or attended school? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list for reference checking purposes.			
Are you legally authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No (If hired, you will be required to provide proof or work authorization)			
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.			
Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted. Convictions are not an automatic bar to employment. Applicants are not obligated to disclose sealed or expunged records of conviction or arrest.			
Do you have any pending criminal charges against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe the 1) nature of the charges, 2) date issued, and 3) county and state where issued?			
Have you applied with the City of Geneseo before? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, when: _____		Have you ever worked here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when: _____	
<b>Position Applying for</b>	Part-Time or Full-Time Desired	Salary Desired	Shift Preference

When can you start?

## Special Skills

1. If relevant, please describe word processing speed, software knowledge, and office equipment experience.
2. If relevant, please describe experience using manufacturing machines and equipment.

**Employment History (start with most recent; use separate sheet if necessary)**

Name of Employer	Telephone ( )	
Address		
Job Title	Employment Dates (month and year)	
Name of Immediate Supervisor	From To	
Description of Duties		
Salary – start	Salary – end	Reason for Leaving
If currently employed, may we contact as a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<hr/>		
Name of Employer	Telephone ( )	
Address		
Job Title	Employment Dates (month and year)	
Name of Immediate Supervisor	From To	
Description of Duties		
Salary – start	Salary – end	Reason for Leaving
<hr/>		
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<hr/>		
Name of Employer	Telephone ( )	
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Job Title	Employment Dates (month and year)	
Name of Immediate Supervisor	From To	
Description of Duties		
Salary – start	Salary – end	Reason for Leaving

**Education**

School	Name and Location (city, state)	No. Years Attended	Major subjects	Diploma or Degree Rec'd
High				<input type="checkbox"/> Yes <input type="checkbox"/> No
College				<input type="checkbox"/> Yes <input type="checkbox"/> No Type:
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No Type:
Other (specify)				<input type="checkbox"/> Yes <input type="checkbox"/> No Type:

**Training Courses**

List any relevant training programs completed.

Course/Seminar	Organization Sponsoring	Content	Date(s) Attended

**Required License(s)**

1) driver's license number		2) state issued	
Are you licensed with any group, association or society relating to the job for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Registration or License Number	State Issued	Expiration Date	

Employment References	
List individuals familiar with your job qualifications (no relatives or previous employers).	
Name	Day Telephone (    )
Address	Evening Telephone(    )
Relationship	How long known?
Name	Day Telephone (    )
Address	Evening Telephone(    )
Relationship	How long known?
Name	Day Telephone (    )
Address	Evening Telephone(    )
Relationship	How long known?

**Please Read Carefully Before Signing This Form**

1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
2. I authorize the city to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purposes of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.
3. I understand that upon receiving a job offer, a physical examination and drug screening may be requested. (Note: If this is a job requirement, you will be notified) I also understand that upon employment, I must furnish proof of eligibility to live and work legally in the United States.
4. Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.

Signed by Applicant \_\_\_\_\_ Date \_\_\_\_\_

