## **VILLAGE OF FRANKLIN PARK**

An Equal Opportunity Employer

#### **APPLICATION FOR EMPLOYMENT**

(Pre-Employment Questionnaire)

PERSONAL INFORMATION						
DATE:	SOCIAL SECURITY	NUMBER:				
NAME:	FIRST	MIDDLE INITIAL				
PRESENT ADDRESS:Street	City	State	Zip			
FORMER ADDRESS:Street	City	State	Zip			
PHONE NUMBER:	•		,			
SPECIAL QUESTIONS  Do not answer any of the questions in this framed area unless the Employer has checked a box preceding a question, thereby indicating that the information is required for a bona fide occupational qualification or dictated by Nation Security Laws or is needed for legally permissible reasons:    Height Weight   Jbs.     Date of Birth* What foreign language do you speak fluently, if any? Read Write     Have you been convicted of a felony or misdemeanor within the last 5 years?** Yes No     If yes, please describe Are you prevented from lawfully becoming employed in the U.S.? Yes No     *The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40, but less than 70 years of age.  **You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.    EMPLOYMENT DESIRED:						
POSITION:	Date you can start?	Salary Desi	red			
ARE YOU EMPLOYED NOW? YES	NO If so, may we inqui	ire of your present emp	oloyed?			

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? \_\_\_\_\_ WHERE?\_\_\_\_ WHEN?\_\_\_\_

EDUCATION	N	NAME & LOCATION OF SCHOOL		# OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED	
GRAMMAR SCH	lOOL			_			
HIGH SCHOO	DL						
COLLEGE				-			
TRADE/BUSINES CORRESPONDE							
FORMER EMP	FORMER EMPLOYERS (List below the last four employers starting with the last one first.)						
Date Month and Year		NAME AND ADDRESS OF EMPLOYER	SALA	RY PC	SITION	REASON FOR LEAVING	
From							
То							
From							
То							
From					_		
То							
From							
То							
PHYSICAL RECORD:  Do you have any physical limitations that preclude you from performing any work for which you are being considered?  Yes No  If Yes, please explain and what can be done to accommodate your limitation?  "I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice."							
	Date						
Signature							

## VILLAGE OF FRANKLIN PARK APPLICATION FOR EMPLOYMENT ATTACHMENT "A"

#### **REFERENCES**

Fill in below the names of five adults not related to you and not former employers, who have k	nown
you for a period of time, preferably more than five years. All persons to whom you refer will be	e asked
to appraise your character, ability, experience, personality and other qualities.	

1.	NAME	IAME		YEARS KNOWN PHO		:		
		Address						
		Business Addre	ess	Occupation o	r Profession		Business Phone	
2.	NAME				YEARS KNOWN	_ PHONE	::	
		Address						
		Business Addre	ess	Occupation o	r Profession		Business Phone	
3.	NAME				YEARS KNOWN	_ PHONE	:	
		Address						
		Business Addre	ess	Occupation o	r Profession		Business Phone	
4.	NAME				YEARS KNOWN	_ PHONE	:	
		Address						
		Business Addre	ess	Occupation o	r Profession		Business Phone	
5.	NAME				YEARS KNOWN	_ PHONE	:	
		Address						
		Business Addre	ess	Occupation o	 or Profession		Business Phone	
	MEDCEN	NCY CONTAC	T INFORM	ATION				
				ATION			ATIONOLUB	
					HOME PHONE		LATIONSHIP	
	AME	of Franklin Parl	ADDRESS	Employment O	HOME PHONE pportunity employer se	,	LATIONSHIP	
ar	nd other m				applicants for employ			
					ons, omissions, or falsit ny knowledge and belie		this questionnaire,	
					Date:			
Si	ignature				<u></u>			

### VILLAGE OF FRANKLIN PARK APPLICATION FOR EMPLOYMENT ATTACHMENT "B"

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The Village of Franklin Park is an equal employment opportunity employer seeking qualified Black, Hispanic and Other Minority Applicants, as well as qualified White applicants, for employment without regard to race, color, sex or ethnic origin.

Bulletin Board Announcement (Specify Location)

Newspaper Advertisements (Specify Newspaper)

Triton Community College Wright Jr. College

Other (Specify)

Illinois State Employment Service

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in this questionnaire, and all my answers are true and correct to the best of my knowledge and belief.

Dat	e:

Signature in Full