



Are you related to any current member of the Village of Oak Park Board of Trustees, or any person now employed by the Village of Oak Park? If Yes, provide the information requested below, otherwise indicate DNA.

Name	Name
Department	Relationship
Department	Relationship

**II. EDUCATION AND SKILLS**

<b>HIGH SCHOOL NAME</b>	Course of Study/Major
City	State
Was Diploma or Degree Granted?	List Diploma or Degree (Please specify if GED)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (mm/dd/yyyy)

<b>POST SECONDARY/COLLEGE NAME</b>	Course of Study/Major
City	State
Was Diploma or Degree Granted?	List Diploma or Degree (Please specify if GED)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (mm/dd/yyyy)

<b>POST SECONDARY/COLLEGE NAME</b>	Course of Study/Major
City	State
Was Diploma or Degree Granted?	List Diploma or Degree (Please specify if GED)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Date (mm/dd/yyyy)

Do you hold any license, registration or certification required by or related to the position for which you are applying? Include all licenses such as Commercial Driver License, operator's license, etc.

<input type="checkbox"/> License	Type	Issued By	Expiration	Number
<input type="checkbox"/> License	Type	Issued By	Expiration	Number
<input type="checkbox"/> Registration	Type	Issued By	Expiration	Number
<input type="checkbox"/> Certification	Type	Issued By	Expiration	Number
<input type="checkbox"/> Other	Type	Issued By	Expiration	Number

List any special skills or equipment you can operate. \_\_\_\_\_

Describe your computer experience, including all software applications. \_\_\_\_\_

**III. WORK EXPERIENCE** List name, address and phone number of the PREVIOUS FOUR (4) EMPLOYERS with the most recent employer first. DO NOT use "refer to resume."

1. \_\_\_\_\_

Position	Employer Name	Immediate Supervisor	Last Salary
Address Street	City	State	Zip Code
City	State	Zip Code	Internet (Web) Address
Work Schedule	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	From (mm/yyyy)	To (mm/yyyy)
Describe your major duties.	May we contact this employer?		
Reason(s) for leaving.	<input type="checkbox"/> Yes <input type="checkbox"/> No		

2. \_\_\_\_\_  
 Position Employer Name Immediate Supervisor Last Salary  
 \_\_\_\_\_  
 ( )  
 Address Street Phone E-Mail  
 \_\_\_\_\_  
 City State Zip Code Internet (Web) Address  
 Work Schedule  Full Time  Part Time  
 \_\_\_\_\_  
 From (mm/yyyy) To (mm/yyyy)  
 Describe your major duties. \_\_\_\_\_ May we contact this employer?  
 Reason(s) for leaving. \_\_\_\_\_  Yes  No

3. \_\_\_\_\_  
 Position Employer Name Immediate Supervisor Last Salary  
 \_\_\_\_\_  
 ( )  
 Address Street Phone E-Mail  
 \_\_\_\_\_  
 City State Zip Code Internet (Web) Address  
 Work Schedule  Full Time  Part Time  
 \_\_\_\_\_  
 From (mm/yyyy) To (mm/yyyy)  
 Describe your major duties. \_\_\_\_\_ May we contact this employer?  
 Reason(s) for leaving. \_\_\_\_\_  Yes  No

4. \_\_\_\_\_  
 Position Employer Name Immediate Supervisor Last Salary  
 \_\_\_\_\_  
 ( )  
 Address Street Phone E-Mail  
 \_\_\_\_\_  
 City State Zip Code Internet (Web) Address  
 Work Schedule  Full Time  Part Time  
 \_\_\_\_\_  
 From (mm/yyyy) To (mm/yyyy)  
 Describe your major duties. \_\_\_\_\_ May we contact this employer?  
 Reason(s) for leaving. \_\_\_\_\_  Yes  No

Have you ever been employed using a different name?  Yes  No

If Yes, explain in detail listing name(s), and date(s) in the Comments section.

Explain any gaps in your employment history in the space below and in the Comments section if you need additional room.

\_\_\_\_\_

\_\_\_\_\_

Have you ever been terminated or asked to resign from a job?  Yes  No

If Yes, explain in detail listing reason(s), date(s), and location(s) in the Comments section. **Note:** Answering "Yes" does not constitute an automatic bar to employment. Factors such as age and date on which you were terminated or asked to resign and recent work history will be taken into account.

May we contact your current employer?  Yes  No

If No, explain in detail the reason(s) in the Comments section.

Do you have adequate transportation to and from work?  Yes  No

If No, explain in detail the reason(s) in the Comments section.



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**REQUIRED:**

- I certify that the information provided in this Application for Employment (and accompanying resume, if any) is true and correct to the best of my knowledge. I understand that any misrepresentation, omission, or falsification of information contained in this Application (or accompanying resume) will be cause for the denial of my application and constitute grounds for immediate dismissal from any subsequent employment with the Village of Oak Park. Check the box and place your initials here indicating that you so certify and understand:
- I understand that this application does not constitute an employment contract or an offer of employment. In consideration of my employment, I agree to conform to the rules and regulations of the Village of Oak Park. Check the box and place your initials here indicating that you understand and agree:
- In further consideration of my employment, I understand and agree that my employment is contingent upon successful completion of a pre-employment physical including a drug screen, criminal background investigation and reference checks. Check the box and place your initials here indicating that you understand and agree:
- I hereby authorize persons, schools, and/or previous employers named in this application (and accompanying resume, if any) to provide the Village of Oak Park with all records and information regarding employment with them, and I release all individuals, partnerships, associations or corporations from any and all liability, claims or damages that may result from the use, disclosure or release of such information. Check the box and place your initials here indicating that you so certify and understand:
- I understand that at any time during my employment, the Village may require me to submit to a physical examination, drug and/or alcohol test to the extent permitted by law. I consent to the disclosure of the results of any physical examination or related testing including drug and alcohol testing to the Village. I understand that if I should decline to sign this consent or decline to take such tests, my application for employment may be rejected or my employment terminated. Check the box and place your initials here indicating that you understand and consent:
- I certify that I have read the foregoing paragraphs. Check the box and place your initials here indicating that you so certify and understand:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date