

EMPLOYMENT APPLICATION FORM

The employment application form is one of the initial steps in the employment screening process. The employment application can be used to formulate interview questions and provide important past work experience information. Your employment application should be reviewed by an attorney specializing in labor law on a regular basis to help ensure compliance with applicable employment laws.

It is very important that persons using the job application during the interview process not write notes, codes or other statements on the form. These notes could be construed as discriminatory if not written clearly.

Agencies should consider using risk management statements and questions on application forms that can help establish employment status and identify conflicts that could deny employment, if warranted. The following employment application statements should be considered as additions to your existing job application form(s).

1.
 - a. *“Have you ever been **convicted** of any felony? Yes No”*
 - b. *“Have you ever been convicted of a misdemeanor involving dishonesty, criminal sexual conduct, assault or battery, or any criminal drug statute? YES NO”*

Effective 7/6/00, section 1205/8-23 of the Park District Code requires *all* park districts to conduct criminal background checks on all applicants for employment.

The district is required by state statute (70 ILCS 1205/8-23) to obtain criminal conviction information concerning applicants, and shall perform a criminal background check for applicants for all positions, including the position for which you have applied. Conviction of offenses enumerated in subsection (c) of said statute 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. Applicants are not obligated to disclose sealed or expunged records of conviction.

2. *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 ANYTIME, 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 Applicant Statement serves several important purposes. First, it authorizes the employer to investigate all statements/information contained in the application. This assists the employer in selecting reliable employees who are best suited to perform a particular job. Second, including at-will information makes your position clear to the applicants from the beginning by clarifying the terms and conditions of employment and informing applicants that there is no express or implied employment contract. Third, requiring applicants to attest to the accuracy of the application and/or interview information maximizes accurate information being provided and provides a recognized and important basis for denying employment or terminating employment when false or misleading information is discovered post-employment. Terminations should only be done with the advice of your attorney.

EMPLOYMENT APPLICATION FORM

SOUTH WEST SPECIAL RECREATION ASSOCIATION IS AN EQUAL OPPORTUNITY EMPLOYER. Employment with SWSRA 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. THOSE APPLICANTS REQUIRING REASONABLE ACCOMODATION TO THE APPLICATION/INTERVIEW PROCESS SHOULD NOTIFY THE HUMAN RESOURCE MANAGER.

Date of Application: _____

Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip)

Home Phone _____ Cell Phone: _____ Email _____

Driver's License # _____ Social Security #: XXX-XX- _____

Have you submitted an application here before? Yes No

Have you ever been employed with us before? Yes No
If Yes, give date _____

Are you currently employed? Yes No

If you are currently employed, may we contact your present employer? Yes No

Are you legally eligible for employment in this country? Yes No

Application for (check applicable):

_____ **Office** _____ **Recreation Department (check any applicable below):**

_____ **PR/Marketing** **Day Camp** _____ **Weekly Programs** _____ **Weekly Events** _____

Available for: _____ Part Time Employment _____ Full Time Employment _____ Seasonal

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 begin work: _____

Are you currently on "lay-off" status and subject to recall? Yes No

EDUCATIONAL BACKGROUND (fill in below):

EDUCATION	SCHOOL Name/ Location	Number of Years Completed	MAJOR	YES/NO Degree/ Diploma
High School				
College/ University				
Other Training, Education				

Have you served in the U. S. Armed Forces (include National Guard or Reserves) _____? Date of duty:_____

Do you have experience driving an oversized vehicle, such as a 15 passenger van? Yes__No__

List experiences working with individuals who have special needs:_____

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

Have you ever been convicted of any 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. Conviction of offenses enumerated in subsection (c) of said statute 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, describe:_____

WORK HISTORY (fill in below, beginning with most current employment).

Most recent employer	Address	Phone
Date started	Starting Salary	Starting Position
Date left	Salary on leaving	Position on leaving
Name and title of supervisor		
Description of duties		Reason for leaving

Employer	Address	Phone
Date started	Starting Salary	Starting Position
Date left	Salary on leaving	Position on leaving
Name and title of supervisor		
Description of duties		Reason for leaving
Employer	Address	Phone
Date started	Starting Salary	Starting Position
Date left	Salary on leaving	Position on leaving
Name and title of supervisor		
Description of duties		Reason for leaving

NOTE: Please explain any gaps in employment _____

FOR EACH OF THE FOLLOWING, MARK YOUR SKILL LEVEL USING THE FOLLOWING SCALE:

1 – Poor

2 – Fair

3 – Average

4 – Good

5 - Excellent

OFFICE:

___ Typing

___ Payroll

___ Computer programs-name below

___ Shorthand

___ Filing

___ _____

___ Bookkeeping

___ Program Registration

___ _____

___ Other

___ _____

RECREATION

___ Arts/Crafts

___ Day Camp

___ Officiating

___ Athletic Leagues

___ Dramatics

___ Pre-school

___ Ballet

___ Drawing

___ Puppetry

___ Baseball

___ First Aid

___ Soccer

___ Basketball

___ Floor Hockey

___ Softball

___ Bocce Ball

___ Football

___ Sr. Citizens

___ Bowling

___ Golf

___ Swimming

___ Camping

___ Gymnastics

___ Tennis

___ Children's Games

___ Music

___ Volleyball

___ Dancing

___ Nature Activities

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 BUSINESS OFFICE.**

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 ___ No ___

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 SOUTH WEST SPECIAL RECREATION ASSOCIATION 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 SWSRA'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 ANYTIME, AT EITHER MY OR SWSRA'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 SOUTH WEST SPECIAL RECREATION ASSOCIATION.

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 _____

FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Arrange Interview: _____ YES _____ NO

Date _____ Time _____

Interviewed by _____

Position interviewed for _____

Starting date: _____

Pre-employment screenings scheduled? _____

Hired _____ YES _____ NO Position _____

Pay Rate/Salary \$ _____ Department _____

Hired by _____ Date _____

Reviewed essential requirements of job? _____

EMPLOYMENT REFERENCES

PLEASE LIST THE NAME, ADDRESS AND PHONE NUMBER OF THREE REFERENCES, NOT RELATED TO YOU, THAT WE MAY CONTACT.

1. COMPANY _____
(Check One) _____ Past Employer _____ Other
NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE # _____

(For Office Use Only) _____

2. COMPANY _____
(Check One) _____ Past Employer _____ Other
NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE # _____

(For Office Use Only) _____

3. COMPANY _____
(Check One) _____ Past Employer _____ Other
NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE # _____

(For Office Use Only) _____