

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 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, 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:

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

Date of Duty: _____

Branch of Service: _____ Applicable skills acquired: _____

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

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

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 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 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 _____

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) _____

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 _____

***Authorization and Release Form to Verify
Background, References and Past Experience***

Winnetka Park District

I, _____, hereby authorize the Winnetka Park District, its park commissioners, officials, officers, employees and its designees to research all legally obtainable information related to my background, references and past experience and I authorize any person so contacted to release such information. ***I acknowledge and understand by signing this form I am releasing the Winnetka Park District, its park commissioners, officials, officers, employees and designees, and any person contracted, from any claims I or any person asserting a claim on my behalf may have by virtue of the disclosure of any information as authorized by me. No person has the authority to modify or lessen the scope of this release given by me and I may not rely on any implied or actual representations to the contrary.***

I hereby further authorize the Winnetka Park District, through its park commissioners, officials, officers, employees and designees (collectively "Park District Personnel"), to make such independent investigation as it/they shall in its/their sole discretion deem necessary or desirable in connection with my employment application, including without limitation, contacting past employers, references, and state and local government authorities and agencies, including without limitation, the Secretary of State, the State Police, and the Federal Bureau of Investigation, in order to determine my apparent suitability for employment with the Winnetka Park District. I hereby authorize each and every party so contracted to release to Park District Personnel any and all information, which Park District Personnel shall request in connection with my employment application. Also, I agree to provide my fingerprints if requested by the Park District.

In consideration of the Winnetka Park District accepting my application and considering me for the position for which I am applying and in order to induce prior employers and all other parties contracted pursuant to this authorization to release such information, I hereby release and hold harmless each such party contracted and Park District Personnel from and against any claims, suits or proceedings which I or any person asserting a claim on my behalf may have by virtue of the disclosure of such information by any party contracted or by virtue of the obtainment of such information by Park District Personnel. I agree to fully indemnify and forever release and hold harmless the Winnetka Park District, Park District Personnel and each party or person (including the Illinois State Police) supplying Park District Personnel with information relative to this application from and against any and all claims, suits, proceedings or liability of whatsoever nature which I or anyone claiming through me might otherwise have or which may result by virtue of this investigation or disclosure of such information (including but not limited to personal opinions and observations concerning my personal character).

I understand and acknowledge that any false or misleading answer or statement, any attempt by me to limit the scope of the background and reference investigation, or any omission of any answer or statement made by me in this employment application may result in non-hire or, if I am hired, disciplinary action up to and including dismissal.

Dated this _____ day of _____, 2010

Name: _____
Last First Middle Name or None

Sex Race Date of Birth

Social Security Number

Signature _____

Parent's or guardian's signature if employee is under 18