

**Village of South Barrington
30 South Barrington Road
South Barrington, Illinois 60010**

Application for Employment

INSTRUCTIONS: PLEASE FILL OUT THIS APPLICATION COMPLETELY AND ACCURATELY. ALL STATEMENTS IN YOUR APPLICATION ARE SUBJECT TO VERIFICATION. INCORRECT OR FALSE INFORMATION MAY BAR OR REMOVE YOU FROM CONSIDERATION, OR MAY RESULT IN TERMINATION OF EMPLOYMENT. IF THE SPACE PROVIDED IS INSUFFICIENT, USE CONTINUATION SHEETS AT THE END OF THIS APPLICATION; IDENTIFY ADDITIONAL INFORMATION BY QUESTION NUMBER.

1. Name (Last)	(First)	(Middle)
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2. Home Address	City	State	Zip	3. Home Phone	4. Cell Phone
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5. Are you over the Age of 21 <input type="checkbox"/> Yes <input type="checkbox"/> No	6. Sex <input type="checkbox"/> M <input type="checkbox"/> F	7. Height FT. IN.	8. Weight	9. Color Eyes	10. Hair	11. Social Security #
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12. Are you a U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	13. <input type="checkbox"/> Native Born <input type="checkbox"/> Naturalized	
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14 Driver's License Number	State	Class	Expiration Date
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15. High School Attended	Location	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No
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16. Colleges and Universities Attended	Location	Description of Courses, Major Subjects	Number of Credit Hours	Degree Received

17. Military Service

Branch _____ Date of Entry _____ Date of Discharge _____

PLEASE ATTACH A COPY OF YOUR DD214

18. Are you certified as a police officer by the Illinois Law Enforcement Training Standards Board? YES NO

PLEASE ATTACH A COPY OF YOUR ILETSB CERTIFICATION

Questions Answered "Yes" Require an Explanation in the remarks Section Below.

If Needed, Use A Separate Sheet To Fully Explain Your Answer(s).

a. Have you ever applied with or worked for the Village of South Barrington?..... Yes No

b. Have you ever used any other name? Yes No

c. Have you ever pled "Guilty", "Stipulated to the Facts", or been "Convicted" of any Criminal Offense, other than minor traffic violation?..... Yes No

d. Do you have any relatives employed by the Village of South Barrington? Yes No

e. Have you ever been terminated, forced to resign, or resigned in lieu of being fired From Any Employment Position?..... Yes No

f. Would you object if we contacted your present or past employer(s) for work reference? Yes No

REMARKS: _____

Pursuant to the Immigration Reform and Control Act (IRCA) of 1986, all applicants will be required to show proof of legal residence entitling them to work in the United States, prior to becoming an employee of the Village of South Barrington.

(DO NOT ATTACH A RESUME IN LIEU OF PROVIDING THIS INFORMATION) USE EXTRA SHEET(S) IF NECESSARY

EXPERIENCE: BEGIN WITH YOUR MOST RECENT EXPERIENCE. LIST ALL POSITIONS HELD FOR THE LAST 10 YEARS. INCLUDE PERIODS OF UNEMPLOYMENT AND MILITARY SERVICE. YOU MUST PROVIDE ALL INFORMATION REQUESTED ABOUT YOUR QUALIFICATIONS AND WORK RECORD.			
Mo/Yr TO Mo/Yr	NAME OF BUSINESS OR AGENCY / DEPARTMENT	TITLE OF YOUR POSITION	TELEPHONE NUMBER
HOURS PER WEEK	ADDRESS OF BUSINESS OR AGENCY / DEPARTMENT	CITY, STATE, ZIP	SUPERVISOR.
SALARY/MONTH \$	DUTIES: _____		
	REASON FOR LEAVING _____		
Mo/Yr TO Mo/Yr	NAME OF BUSINESS OR AGENCY / DEPARTMENT	TITLE OF YOUR POSITION	TELEPHONE NUMBER
HOURS PER WEEK	ADDRESS OF BUSINESS OR AGENCY / DEPARTMENT	CITY, STATE, ZIP	SUPERVISOR
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HOURS PER WEEK	ADDRESS OF BUSINESS OR AGENCY / DEPARTMENT	CITY, STATE, ZIP	SUPERVISOR
SALARY/MONTH \$	DUTIES: _____		
	REASON FOR LEAVING _____		

MO/YR TO MO/YR	NAME OF BUSINESS OR AGENCY / DEPARTMENT	TITLE OF YOUR POSITION	TELEPHONE NUMBER
HOURS PER WEEK			SUPERVISOR.
SALARY/MONTH \$	DUTIES: _____		
	REASON FOR LEAVING _____		
MO/YR TO MO/YR	NAME OF BUSINESS OR AGENCY / DEPARTMENT	TITLE OF YOUR POSITION	TELEPHONE NUMBER
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CERTIFICATION OF APPLICANT:

I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION AND ANY ATTACHMENTS ARE TRUE AND CORRECT.

I AGREE AND UNDERSTAND THAT THE MIS-STATEMENT OR OMISSION OF ANY MATERIAL FACT MAY BE CAUSE FOR DISQUALIFICATION, OR DISMISSAL FROM EMPLOYMENT, FROM THE VILLAGE OF SOUTH BARRINGTON.

I UNDERSTAND THAT THE VILLAGE OF SOUTH BARRINGTON AND/OR ITS DESIGNEES MAY INVESTIGATE MY DRIVING RECORD AND MY CRIMINAL RECORD, AND THAT AN INVESTIGATIVE REPORT MAY BE PREPARED.

I FURTHER UNDERSTAND THAT THE VILLAGE OF SOUTH BARRINGTON OR ITS DESIGNEES MAY CONTACT MY PREVIOUS EMPLOYERS. I AUTHORIZE THOSE EMPLOYERS TO DISCLOSE TO THE VILLAGE OF SOUTH BARRINGTON ALL RECORDS AND INFORMATION PERTINENT TO MY EMPLOYMENT WITH THEM.

IN ADDITION TO AUTHORIZING THE RELEASE OF ANY INFORMATION REGARDING MY EMPLOYMENT, I HEREBY FULLY WAIVE ANY RIGHTS OR CLAIMS I HAVE AGAINST MY FORMER EMPLOYERS, THEIR AGENTS, EMPLOYEES OR REPRESENTATIVES, AS WELL AS ANY OTHER INDIVIDUALS WHO RELEASE INFORMATION TO THE VILLAGE OF SOUTH BARRINGTON, WHETHER FAVORABLE OR UNFAVORABLE ABOUT ME, AND I RELEASE THEM FROM ANY LIABILITY, CLAIMS, OR DAMAGES.

SIGNATURE OF APPLICANT

DATE