

# PALATINE TOWNSHIP APPLICATION FOR EMPLOYMENT



## NOTICE: PALATINE TOWNSHIP IS AN AT WILL EMPLOYER.

Palatine Township is an equal opportunity employer. Palatine Township does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law. Palatine Township has a Drug-Free Workplace Policy in effect that is strictly adhered to.

Position Applying For \_\_\_\_\_

### PERSONAL INFORMATION

*Incomplete information could disqualify you from further consideration. Please complete all fields.*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Mobile Phone # \_\_\_\_\_

Are you eligible to work in the U.S? \_\_\_Yes \_\_\_No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)  
\_\_\_Yes \_\_\_No

Have you ever been terminated from employment or asked to resign by an employer?  
\_\_\_Yes \_\_\_No

If yes, please provide company names and details \_\_\_\_\_

Can you work any shift? \_\_\_Yes \_\_\_No If no, explain: \_\_\_\_\_

Can you work overtime, including weekends? \_\_\_Yes \_\_\_No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? \_\_\_Yes \_\_\_No

Can you lift 35 pounds? \_\_\_Yes \_\_\_No

### EMPLOYMENT DESIRED

Date you can start \_\_\_\_\_ Hourly rate/Salary desired \_\_\_\_\_

Type of employment desired: \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time

Position desired \_\_\_\_\_

Are you currently employed? \_\_\_ If so may we inquire of your present employer? \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

**REFERRAL SOURCE**

How did you hear about us? \_\_\_Walk In \_\_\_ Advertisement \_\_\_ Referral \_\_\_Other

Have you ever worked for this company before? \_\_\_Yes \_\_\_No

Please explain \_\_\_\_\_

Do you know anyone who works for our company? \_\_\_Yes \_\_\_No If yes, who? \_\_\_\_\_

\_\_\_\_\_

<b>EDUCATION</b>	<b>Name and location of school</b>	<b>Degree Received</b>	<b>Subjects studied/Major</b>
High School			
College or University			
Trade, Business or Correspondence School			
Additional Professional Certifications			
Additional Professional License(s)			

**REFERENCES**

Give the names of three persons not related to you, whom you have known at least three (3) years.

<b>Name</b>	<b>Address, Phone, Email</b>	<b>Company</b>	<b>Years Acquainted</b>
1			
2			
3			

Applicant Name: \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

**EMPLOYMENT HISTORY** Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

Applicant Name: \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

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**Please read carefully before signing.**

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Palatine Township to hire me. If I am hired, I understand that either Palatine Township or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Palatine Township has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Palatine Township true and complete information on this application. No requested information has been concealed. I authorize Palatine Township to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

I agree, as part of my application for employment at Palatine Township, to any and all background checks necessary for my employment position with Palatine Township.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.**