



Do you have a valid CDL?

Yes  No

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**EDUCATION AND TRAINING**

<b>School</b>	<b>Name/Address</b>	<b>Courses of Study</b>	<b>Circle Last Year Completed</b>	<b>Degree Earned (If yes, indicate degree)</b>
High School			1 2 3 4	Yes No
College			1 2 3 4	Yes No
Post-College/ Vocational			1 2 3 4	Yes No
Other			1 2 3 4	Yes No

Skills and Qualifications – List special training, skills, licenses and certificates relating to this position

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Technical Skills – List any skills/experience that relates to this position (software, heavy machinery, etc.):

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List any professional, trade, business or civic associations to which you belong (please exclude memberships that would reveal any protected status):

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Please provide any other information you think would be helpful to the Village in considering you for employment:

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**EMPLOYMENT HISTORY** – Please begin with your present or most recent employer and provide all the information requested.

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Duties: \_\_\_\_\_

May we contact?     Yes     No



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**PROFESSIONAL REFERENCES** – Please list three references that are familiar with your work history and experience. Do not list relatives, friends or personal references.

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Business Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Business Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Business Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**PLEASE READ CAREFULLY**

I hereby certify that the information contained in this application is true and correct to the best of my knowledge, and understand that making false or incomplete statements on this application in any item or detail is grounds for disqualification from further consideration for employment, or for dismissal.

I understand that all candidates hired are subject to satisfactory completion of a probationary period, drug screen and background investigation. I authorize the investigation of all statements and information contained in this application. I release the Village of Homer Glen from any and all liability that might result from conducting a background investigation. I also release from liability anyone supplying information pursuant to such investigation.

I agree to conform to the rules and regulations of the Village of Homer Glen and understand that my employment and compensation are at-will and can be terminated at any time, with or without cause, and with or without notice, at the option of either the Village of Homer Glen or me. I further understand that no representative of the Village of Homer Glen, other than the Village Manager, has any authority to offer me employment for any specified period of time.

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_