

Eastland Community Unit School District #308
200 South School Street
Lanark, IL 61046
815/493-6301
815/493-6303 (fax)

Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Position(s) Applying For:		Date of Application	
Last Name	First Name	Middle Initial	
Address	City	State	Zip
Telephone Number(s)			
Social Security Number		Date of Birth (optional)	

- Are you currently employed ____ Yes ____ No May we contact your present employer?
 ____ Yes ____ No
- Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ____ Yes ____ No (Proof of citizenship or immigration status will be required upon employment.)
- On what date would you be available for work? _____
- Are you available to work ____ Full-time ____ Part-time ____ Shift Work ____ Temporary
- Are you currently on "lay-off" status and subject to recall? ____ Yes ____ No
- Can you travel if a job requires it? ____ Yes ____ No
- Have you been convicted of a felony within the last 7 years? ____ Yes ____ No (Conviction will not necessarily disqualify an applicant from employment.) If yes, please explain.

- Have you ever worked in a school or activity where children are involved? ____ Yes ____ No If yes, please explain: _____

Education

High School – Name – City – State:		Date of Graduation:
Business or Technical School:		
Dates Attended:	Degree/Major:	
Undergraduate College:		
Dates Attended:	Degree/Major:	
Graduate School:		
Dates Attended:	Degree/Major:	

List professional, trade, business or civic activities and offices held. You may exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status.

References

Name-Address-Phone
Name-Address-Phone
Name-Address-Phone

Have you ever had any job-related training in the United States military? Yes No If yes, please describe: _____

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer:	Dates Employed From: _____ To: _____	Work Performed:
Address:	Hourly Rate/Salary Starting: _____ Final: _____	Job Title:
Telephone No:	Supervisor:	Reason for Leaving:

Employer:	Dates Employed From: To:	Work Performed:
Address:	Hourly Rate/Salary Starting: Final:	Job Title:
Telephone No:	Supervisor:	Reason for Leaving:

Employer:	Dates Employed From: To:	Work Performed:
Address:	Hourly Rate/Salary Starting: Final:	Job Title:
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Employer:	Dates Employed From: To:	Work Performed:
Address:	Hourly Rate/Salary Starting: Final:	Job Title:
Telephone No:	Supervisor:	Reason for Leaving:

Special Skills and Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience.

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

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 hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant Date