



# APPLICATION FOR EMPLOYMENT

8800 Kathy Lane, Niles, IL 60714-5708  
 Phone (847) 297-3000 FAX (847) 297-6179

Golf Maine Park District is an equal employment opportunity employer and does not discriminate in any of its employment practices on the basis of race, color, religion, sex, national origin, ancestry, marital or veteran status, physical or mental handicap or disability, citizenship status or any other legally protected status.

*(PLEASE PRINT)*

<i>Position(s) Applied For</i>		<i>Date of Application</i>
<i>Employment Category:</i>	<i>How Did You Learn About Us?</i>	
<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Summer	<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Other: _____	<input type="checkbox"/> Relative <input type="checkbox"/> Walk-In

<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>	
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<i>Telephone Number(s)</i>		<i>Social Security Number</i>	

Are you at least 16 years of age? If hired, proof will be required.  Yes  No

Have you ever been employed by us before?  Yes  No

If yes, give date and position held: \_\_\_\_\_

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 a Visa or Immigration Status? *Completion of the I-9 Immigration Form will be required upon employment*  Yes  No

If the position for which you are applying requires that you drive during scheduled work hours, can you provide evidence of a valid Illinois Driver's License?  Yes  No

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: \_\_\_\_\_

Were you ever dismissed or forced to resign because of misconduct or unsatisfactory service?  Yes  No

If Yes, please explain: \_\_\_\_\_

## EDUCATION

	Elementary School	High School	Undergraduate College/University	Graduate/Professional
School Name & Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills and extra-curricular activities				
Describe any honors you have received.				
State any additional information you feel may be helpful to us in considering your application.				

Have you ever had any job-related training in the United States military? \_\_\_ Yes \_\_\_ No

If Yes, please describe: \_\_\_\_\_

**List professional, trade, business or civic activities and offices held.**

*You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry or disability or other protected status.*

---



---



---



---

**Limitations:** Are there any physical or personal limitations or considerations that may interfere with or otherwise impact upon your ability to perform the job for which you are applying? \_\_\_ Yes \_\_\_ No

If Yes, please explain: \_\_\_\_\_

---



---

## REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1.	
2.	
3.	

## EMPLOYMENT EXPERIENCE

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

* Employer	Dates of Service	Work Performed
Address	<u>Hourly Rate/Salary</u> Starting                      Final	
Telephone Number(s)		
Job Title	Supervisor	
Reason for Leaving		
* Employer	Dates of Service	Work Performed
Address	<u>Hourly Rate/Salary</u> Starting                      Final	
Telephone Number(s)		
Job Title	Supervisor	
Reason for Leaving		
* Employer	Dates of Service	Work Performed
Address	<u>Hourly Rate/Salary</u> Starting                      Final	
Telephone Number(s)		
Job Title	Supervisor	
Reason for Leaving		

## Special Skills & Qualifications

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

---

---

---

### CERTIFICATION

I certify that there are no willful misrepresentations, omissions or falsifications in this application, and all my answers are true and correct to the best of my knowledge and belief. I understand that any false statements or omissions may result in my elimination for consideration for employment, or, if hired, my termination. I hereby authorize the Golf Maine Park District to make investigation of all statements contained in this application. I authorize the persons listed as references, my former and present employers, and educational institutions listed to release any information concerning me that they deem appropriate. I release all parties from any liability that may arise from such disclosure.

I understand that I may be subject to a criminal background investigation as a condition of employment and that my employment may be contingent upon its results. I further understand that I may be required to submit to a medical examination, including drug screening, as a condition of employment, and that, if hired, I may be required to submit to future medical examinations, including drug screening, at the Park District's discretion. I understand that my employment or continuation thereof, may be contingent upon the results of any medical examinations, including drug screening.

*I understand that, if employed, my employment is at-will. This means that either the Park District or I may terminate the employment relationship at any time and for any reason or no reason. I understand that neither this document nor any offer of employment from the Park District constitutes an employment contract. I further understand that no one other than the Board of Park Commissioners has the authority to enter into an agreement contrary to the foregoing and that such agreement must be written and signed by the Board President and by me.*

If hired, I agree to comply with and be bound by all of the personnel policies and employee requirements of the Park District.

I hereby acknowledge that I have read and understand the foregoing and intend to be bound thereby.

---

Signature of Applicant

---

Date