



EMPLOYMENT APPLICATION

Last Name	First Name	Middle Name/Initial
<hr/>		
Street and Number	City	County
<hr/>		
State	Zip	Phone ()
<hr/>		

Can your education and/or employment records be verified using the above name and social security number?
Yes _____ No _____

If no, list other name(s): _____
Name, address and phone number of person who will know where you may be contacted:

Phone () _____

Please follow these general instructions:

1. Read the Examination/Position Announcement and be sure you meet, **with or without reasonable accommodation**, the "QUALIFICATIONS" listed.
2. Answer all questions and complete all spaces on the application.
3. Submit all transcripts and documents at the time of application.

Position(s) applied for: _____

How did you learn of the examination/position? _____

Have you previously been employed by McLean County? Yes _____ No _____
If yes, from _____ to _____ Department _____

Are you at least eighteen (18) years of age? Yes _____ No _____

Are you a U.S. citizen or an alien legally authorized to work in the United States? Yes _____ No _____

On what basis are you available for employment? (Check any or all that apply)
Full time _____ Part-time _____ Summer _____ Temporary _____

Are you available for:
Weekends and Holidays Yes _____ No _____
Rotating Shifts Yes _____ No _____
On Call Yes _____ No _____

Shift Preference (check any or all that apply): Days _____ Evenings _____ Nights _____

Date available for work ____/____/____ Rate of pay expected \$ _____ per hour.

-
1. Have you ever been discharged or asked to resign from employment? Yes No
 2. Do you object to an inquiry of you present employer in regard to your ability to work with others, work record, qualifications or abilities? Yes No If yes, explain: _____

IF YOU HAVE ANSWERED "YES" TO ANY OF THE LAST TWO QUESTIONS, please give specifics on a separate sheet. A "yes" answer does not automatically disqualify you from employment.

Answer the four questions below if they are essential functions of the job for which you are applying.

1. Do you possess a valid Driver's License? Yes _____ No _____ N/A _____
2. Do you possess a valid Commercial Drivers License Yes _____ No _____ N/A _____
3. Can you produce typed material (typewriter, computer, other)? Yes _____ No _____ N/A _____
4. Can you take notes verbatim (word for word) at a reasonable speed? Yes _____ No _____ N/A _____

List any in-service training, instruction courses or programs you have completed: _____

List any special information as to your work record you may deem of value: _____

Are there any other experiences, skills or qualifications that you feel would especially fit you for work with McLean County and/or the position for which you are applying? _____

If license, certificate or other authorization to practice a trade or profession is required for the position for which you are applying, complete the following:

Name of trade or profession: _____ License Number: _____
 Granted By: _____ City and/or State of: _____
 Specialty: _____ Licensed From: _____ To: _____

EDUCATION	Name and Location	Years Completed				Diploma/Degree	Course of Study
		9	10	11	12		
High School							
College		1	2	3	4		
Graduate / Professional		1	2	3	4		
Trade School		1	2	3	4		

Describe your extra-curricular activities (e.g. professional/student organizations, leisure activities, civic, etc...):

EMPLOYMENT EXPERIENCE

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

1. Employer	Dates Employed		Work Performed:
	From	To	
Address	Hourly Rate/Salary		
	Starting:		
Telephone	Final:		
Job Title	Supervisor		
Reason for Leaving			

2. Employer	Dates Employed		Work Performed:
	From	To	
Address	Hourly Rate/Salary		
	Starting:		
Telephone	Final:		
Job Title	Supervisor		
Reason for Leaving			

3. Employer	Dates Employed		Work Performed:
	From	To	
Address	Hourly Rate/Salary		
	Starting:		
Telephone	Final:		
Job Title	Supervisor		
Reason for Leaving			

4. Employer	Dates Employed		Work Performed:
	From	To	
Address	Hourly Rate/Salary		
	Starting:		
Telephone	Final:		
Job Title	Supervisor		
Reason for Leaving			

REFERENCES

List three business/work references who are not related to you and are NOT previous supervisors. If not applicable, list three school or personal references who are not related to you.

1. _____
 Name Relationship Years Acquainted

 ()
 Address Phone

2. _____
 Name Relationship Years Acquainted

 ()
 Address Phone

3. _____
 Name Relationship Years Acquainted

 ()
 Address Phone

AGREEMENT

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

I authorize McLean County to make such investigations and inquiries of my personal and employment history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

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

Signature of Applicant Date

NOTE: If you are applying for a position with the following departments, you will need to complete a form for purposes of a background investigation. Please ask for one of these forms.

- CIRCUIT CLERK**
 - DEPARTMENT COURT SERVICES**
 - FACILITIES MANAGEMENT**
 - PARKS AND RECREATION**
 - METRO McLEAN COUNTY COMBINED COMMUNICATIONS CENTER (METCOM)**
- SHERIFF'S**

FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Application reviewed by:

_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date
_____ Name	_____ Date	_____ Name	_____ Date