

# WESTCHESTER PARK DISTRICT

10201 Bond Street  
Westchester, IL 60154



## EMPLOYMENT APPLICATION

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Home Phone	E-mail Address		
Cell Phone			Date Available
Position Applied for			
Type of Work	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Summer <input type="checkbox"/> Instructor <input type="checkbox"/>
Schedule availability	Mon. <input type="checkbox"/>	Tues. <input type="checkbox"/>	Wed. <input type="checkbox"/> Thurs. <input type="checkbox"/> Fri. <input type="checkbox"/> Sat. <input type="checkbox"/> Sun. <input type="checkbox"/>
Time availability	Day Time <input type="checkbox"/>	From: _____ To: _____	Evenings <input type="checkbox"/> From: _____ To: _____
Have you ever worked for this governmental agency?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
If 18 or older are you legally authorized to drive in the State of Illinois?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>
If hired and a minor under age 16, can you provide a School Work Permit?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>

EDUCATION			
High School		Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>
College		Address	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Grad School or Certifications			
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree/Certification

### DISCLAIMER AND SIGNATURE

I hereby certify that all information contained in this application is true, correct and complete to the best of my knowledge and belief. I agree and understand that any false statements contained in this application and other employment documents or during my interview (if applicable) may cause rejection of my candidacy for employment or termination of employment without notice or benefits.

I understand that Westchester Park District is not obligated to provide employment, nor am I obligated to accept employment. Nothing in this application or in any prior or subsequent oral or written statement is intended to create any contract of employment. I understand that the Westchester Park District reserves the right to modify policies and procedures at any time, without notice.

I hereby acknowledge that I have read, understand and agree with all of the above stated information.

Signature	Date
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REFERENCES	
<i>Please list three personal or professional references (non-relatives).</i>	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

PREVIOUS EMPLOYMENT		
Company	Phone ( )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company	Phone ( )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company	Phone ( )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		