

# Application For Employment



## Darien Park District

Administration Office

7301 Fairview Ave · Darien, IL 60561

Phone: 630-968-6400 · Website: [www.darienparks.com](http://www.darienparks.com)

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) Applied For	Date of Application
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How Did You Learn About Us?

- Advertisement       Friend       Walk-in  
 Website       Relative       Other \_\_\_\_\_

Last Name	First Name	Middle Name
Address _____		
City _____	State _____	Zip Code _____

Home Phone Number _____	Cell Phone Number _____
Email Address _____	

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No

Have you ever filed an application with us before?  Yes  No

If Yes, give date \_\_\_\_\_

Have you ever been employed with us before?  Yes  No

If Yes, give date \_\_\_\_\_

Are you related to anyone currently employed by the Darien Park District?  Yes  No

If Yes, give name \_\_\_\_\_

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? *Proof of citizenship or immigration status will be required upon employment.*  Yes  No

On what date would you be available for work? \_\_\_\_\_

Are you available to work:       Full Time       Part Time       Seasonal

Are you currently on "lay-off" status and subject to recall?  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 \_\_\_\_\_

In case of accident or emergency, please notify: \_\_\_\_\_

# Education

	Elementary School					High School				Undergraduate College / University				College / Professional			
School Name and 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																	

List Professional, trade, business or civic activities and offices held.

*You may exclude memberships which would reveal sex, race, national origin, age, ancestry, or handicap or other protected status:*

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# References

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

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Do you require any specialized accommodations to perform the tasks of the job you are applying for?  Yes  No

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

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Are you physically or otherwise unable to perform the duties of the job for which you are applying?  Yes  No

# 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.

1.	Employer	Dates Employed		Work Performed
	Address	From		
	Telephone	To		
	Job Title	Supervisor		
	Reason for Leaving			
2.	Employer	Dates Employed		Work Performed
	Address	From		
	Telephone	To		
	Job Title	Supervisor		
	Reason for Leaving			
3.	Employer	Dates Employed		Work Performed
	Address	From		
	Telephone	To		
	Job Title	Supervisor		
	Reason for Leaving			
4.	Employer	Dates Employed		Work Performed
	Address	From		
	Telephone	To		
	Job Title	Supervisor		
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

## **Special Skills and Qualifications**

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

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# 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 6 months. 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 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

## FOR PERSONNEL DEPARTMENT USE ONLY

Interviewed Yes \_\_\_\_\_ No \_\_\_\_\_

Interviewed by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Hired: Yes \_\_\_\_\_ No \_\_\_\_\_ Position \_\_\_\_\_ Dept. \_\_\_\_\_

Start Salary/Wage \_\_\_\_\_ Date Reporting to Work \_\_\_\_\_

Approved: 1. \_\_\_\_\_ 2. \_\_\_\_\_  
Department Head Director

## Reference Check


Notes: \_\_\_\_\_

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