



## CITY OF WEST CHICAGO

"Where History & Progress Meet"

475 Main Street  
West Chicago, Illinois 60185  
(630) 293-2368  
(630) 231-0523 FAX  
HR@westchicago.org

# CITY OF WEST CHICAGO

## APPLICATION FOR EMPLOYMENT

We appreciate your interest in the City of West Chicago. Please provide the City of West Chicago with your background, education, work experience and skills to enable us to determine whether you are a qualified candidate for the position for which you are applying. Please complete this form fully and accurately. If you are unable to recall specifically any item of information requested, please so indicate. All information provided is subject to verification.

The City of West Chicago is an equal opportunity employer and adheres to the principles and practices outlined in applicable federal, state and local laws and regulations that prohibit discrimination in employment and hiring. It is the policy and practice of the City to hire, train, promote, compensate and administer all employment practices without regard to race, color, ancestry, national origin, religion, sex, marital status, veteran status, medical condition, pregnancy, or physical disabilities unrelated to the ability to perform essential job functions with or without reasonable accommodations. The City of West Chicago fully complies with the Americans with Disabilities Act. If an applicant requests a reasonable accommodation for purposes of completing the job application process, please contact us at (630) 293-2368.

### PERSONAL INFORMATION

(Please Print)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name/Initial: \_\_\_\_\_

Address: \_\_\_\_\_  
Street/Apt. # \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Home Telephone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License No. \_\_\_\_\_ State Issued: \_\_\_\_\_

Are you legally authorized to drive in the State of Illinois? Yes  No  Do you have a valid Illinois CDL? Yes  No

**APPLICANT POSITION**

Position: \_\_\_\_\_ Available Start Date: \_\_\_\_\_

Preferred Status:      Full Time       Part Time       Temporary

Working Schedule:      Days       Evenings       Nights       Weekends       Holidays       Rotating

How did you learn about this position?      City Website       Facebook       LinkedIn       Referral       Job Board   
Professional Association or Board      Other       Please specify: \_\_\_\_\_

Have you ever applied for employment to the City of West Chicago before:      Yes       No       If Yes, when: Month \_\_\_\_\_ Year \_\_\_\_\_

Were you ever employed by the City of West Chicago:      Yes       No       If Yes, when: Month \_\_\_\_\_ Year \_\_\_\_\_

In which Department/Division: \_\_\_\_\_ Job Title: \_\_\_\_\_

Please list any other languages which you can speak or read: \_\_\_\_\_

**SPECIAL TRAINING/EDUCATIONAL HISTORY**

Indicate Highest Grade Completed:	High School 9 10 11 12 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	College 13 14 15 16 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Post Graduate 1 2 M.A. PhD. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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School	Name	Years Attended From To	Major(s)	Graduate Yes/No	Degrees/Certificates
High School:	_____				
College:	_____				
Post Graduate:	_____				
Other:	_____				

Military Service Branch: \_\_\_\_\_ Length of Service: \_\_\_\_\_ Dates: \_\_\_\_\_

**MISCELLANEOUS**

Are you legally authorized to work in the United States?      Yes       No   
Employment is subject to verification of U.S. citizenship or immigration status, in accordance with the Immigration Reform & Control Act.

**EMPLOYMENT HISTORY**

Please list all current employment.

Employer: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City/State Zip

Position Title: \_\_\_\_\_ Name/Title of Supervisor: \_\_\_\_\_

Employment Dates: From: \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_

Are you currently working for this Employer? Yes \_\_\_\_\_ No \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Please list all previous employment.

Employer: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City/State Zip

Position Title: \_\_\_\_\_ Name/Title of Supervisor: \_\_\_\_\_

Employment Dates: From: \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_

**PREVIOUS EMPLOYMENT**

Employer: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City/State Zip

Position Title: \_\_\_\_\_ Name/Title of Supervisor: \_\_\_\_\_

Employment Dates: From: \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_

**REFERENCES**

Please list three (3) references that are familiar with your work history and work experience. Please do not list relatives or friends.

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Relationship: \_\_\_\_\_

Years Known: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Relationship: \_\_\_\_\_

Years Known: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**EMPLOYMENT CERTIFICATION**

I acknowledge that I have read, understand and agree with all of the information provided in this Application. I 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 may cause rejection of my consideration for employment or termination of employment.

I authorize the investigation of current and previous employment and education records and all pertinent information, personal or otherwise. I further authorize the City of West Chicago to receive all information relative to such verification and release all parties from all liability for any damages that may result from furnishing the same. I understand that the City of West Chicago reserves the right to verify criminal records information I have provided through appropriate local, state or federal law enforcement agencies and I authorize same.

I understand that nothing in this Application is intended to create any contract of employment. If accepted for employment, I understand that I will be an at-will employee of the City of West Chicago and I agree to abide by the rules and policies of the City of West Chicago as set forth in the City Code and/or any Employee Policies and Procedures manual.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant