

## Application for Parks and Recreation Department Employment

Personal Information Please print.	n			
		Position Applied For		Date
Last Name	First Name		Social	Security Number
Current Address	City	State	Zip	Phone Number
Are you of the legal a	ge to work?	_Are you legally autho	rized to	o work in the U.S.?
Driver's license numb	per (if job-relate	ed)		State
		ı at home is?		
May we contact you number and best tim		No If Yes, please pro		
- 1.	k be made with	your present employe		
Have you previously If Yes, Please Explain		een employed by, the V	√illage (	of Godfrey? Yes No
Have you ever been d	ischarged by ar	n employer? Yes N	o If Yes	s, Please Explain
felony, misdemeanor	or other offence	do you currently have a e excluding minor traff	ic viola	ations? Yes No
Type of employment	desired Full-	Time Part-Time	Tempo:	rary Seasonal
Are you able to meet	the attendance	requirements of the po	osition?	Yes No

Education	and T	[rain	ing
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	Name and Location	Last Year	Graduated	Degree/Major
	of School	Completed		
High			Yes No	
School				
College/			Yes No	
Tech				
School				
Other			Yes No	

Describe any education and training you hav vocational school, correspondence courses, s volunteer work which you feel is relevant to relevant licenses and/or certifications. Be specific	ervice schools, in-service training, or the job you are applying for. Also include
Are there any other experiences, skills, or qu the job for which you are applying?	alifications that will be of special benefit in
List professional or civic organizations and a that would reveal sex, race, religion, national status.	ny offices held. Please exclude memberships l origin, age, disability or other protected
Organization	Offices Held
D 1D (	

## Personal References—

Name and Occupation	Address	Phone Number

mployment History	
Name of Employer	Job Title
Address, City & State	Supervisor's Name
Duties	Dates Employed From: To:
	May We Contact Now? Yes No
	Beginning & Ending Rate of Pay
Reason For Leaving	
Name of Employer	Job Title
Address, City & State	Supervisor's Name
Duties	Dates Employed From: To:
	May We Contact Now? Yes No
	Beginning & Ending Rate of Pay
Reason For Leaving	
Name of Employer	Job Title
Address, City & State	Supervisor's Name
Duties	Dates Employed From: To:
	May We Contact Now? Yes No
	Beginning & Ending Rate of Pay

The facts set forth in this application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not, and is not intended to be, a contract of employment, nor does this application obligate the employer in any way if the employer employs me.

Reason For Leaving

Date:	Signature: