

APPLICATION FOR EMPLOYMENT

City of Polo
115 South Franklin Avenue
Polo, Illinois 61064

Notice:

The City of Polo complies with all State and Federal equal opportunity laws. Qualified applicants shall be considered for each and every position requested without regard to race, color, religion, sex, national origin, age, marital status, ancestry, veteran status, unrelated medical conditions, handicaps, or other area as set forth by law.

Position requested: _____

Date applicant could begin work: _____

APPLICANT INFORMATION

1.) Please provide only that information which is required for and relevant to the position for which you are applying.

Name _____
(Last) (First) (Middle initial)

Current Address _____
(House #) (Street) (City) (State) (Zip)

Phone _____
(Home) (Work)

Are you at least 18 years old? _____

Are there any physical, mental, or emotional problems that would interfere with your ability to perform the job for which you are applying in any way?

(Yes) (No) (Not Sure)

If "Yes" or "Not sure", please explain.

Why are you seeking this position? _____

Are you legally eligible for employment within the United States of America? _____

Employment History

Current or most recent employment:

Name of Employer: _____

Address: _____

Type of Business: _____

Your position: _____

Start Date: _____ End Date: _____

Reason for leaving: _____

Previous employment:

Name of Employer: _____

Address: _____

Type of Business: _____

Your position: _____

Start Date: _____ End Date: _____

Reason for leaving: _____

For additional prior work history, please attach another sheet of paper with additional history information as requested above.

List all skills and/or qualifications, which you believe, relate to the position for which you have applied, include any previous experience, training, award, recognition's. Also list any machines, instruments, or other devices, which you can operate and which are relevant to this position.

EDUCATIONAL BACKGROUND

Are you a High school graduate or G.E.D.? Yes No (circle one)

If you circled yes, from where? _____

Secondary Education:

Name of school: _____ Years completed: _____

Major or minor: _____

Degrees received: _____

REFERENCES

Name	Address	Phone #	Length of time known
1.)	_____	_____	_____
2.)	_____	_____	_____
3.)	_____	_____	_____

I herby acknowledge that all answers given are true and complete to the best of my knowledge.

Signature

Date