#### CHANNAHON FIRE PROTECTION DISTRICT - STATE OF ILLINOIS APPLICATION FOR EMPLOYMENT

1.					
	last	t	first		middle
2.	List any ot	her names you have used	l or been known by ( <i>inc</i>	lude maiden nar	ne):
3.	Address:	Number & Street	City State		Zip
4.	Phone No.	to best be reached(	)		_
5.	E-mail add	ress to best be reached			_
6.	Driver's Lie	cense State		_	
	Driver's Lie	cense No	Class	S	
7.	Social Sec	urity No		_	
8.	Firearm Ov	wner's I.D. No		_	
9.	Are you au	thorized to work in the U	nited States?	Yes	No
LIST A		R ADDRESSES FOR THE	PAST FIVE YEARS IN C	HRONOLOGICA	L ORDER
10.	Address	Number & Street	City	State	Zip
			City	Slale	ΖIÞ
11.	Address	Number & Street	City	State	Zip
12.	Address				
		Number & Street	City	State	Zip
13.	Address	Number & Street	City	State	Zip
14.	Address				·
		Number & Street	City	State	Zip

## **EDUCATION**

15. CIRCLE HIGHEST GRADE COMPLETED					
	GED CERTIFICATE	HIGH SCHOOI	_	COLLEGE 1 2 3 4	
	GRADUATE SCHOOL	M.A.	Ph.D.	OTHER	
	e and Address of School ude City and State)		Date(s)	) Attended	Graduate ? Yes No
16.	High School				
17.	Undergraduate Education				
18.	Graduate Education				
19.	Trade Schools				
20.	Fire Prevention Education				
21.	EMT School				
22.	What college degrees have you	attained?			
23.	List course work relevant to pos	sition for which y	ou have	applied:	
		MILITA	γv		
			<u> </u>		
24.	Are you now or have you ever b	been in the milita	ry servic	e? YesNo	_
25.	Branch of service				
26.	Are you now or were you ever a or National Guard Unit? Yes _	n active membe No	r of any b	oranch of the U.S. Militar –	ry Reserve Forces
	Rank				
27.	Unit	_From		То	

### **CONVICTION HISTORY**

28. Have you ever been convicted of a crime other than minor traffic violations?

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

If "Yes," explain below:

DATE	POLICE AGENCY	OFFENSE	DISPOSITION OF CASE

29. List all traffic convictions and accidents you have had in the last four years. (If more room is needed, please type on a separate page and attach).

LOCATION (City-State)	APPROXIMATE DATE	VIOLATION	DISPOSITION

#### **EMPLOYMENT HISTORY**

List all jobs you have had for the last ten years. Include periods of unemployment. Put your present job first. Include military service in proper time sequence along with temporary or part-time jobs.

30.	Present employer's name:	P	Phone		
	Address Number & Street				
	Number & Street	City	State	Zip	
	Summary of Duties				
	Do you object to our contacting them?				
	Employed to Present				
	month-year				
31.	Employer's name	P	hone		
	Address Number & Street				
	Number & Street	City	State	Zip	
	Summary of Duties				
	Do you object to our contacting them?				
	Employed to month-yearmonth-year				
	month-year month-year				
20	Employer's name	п	hana		
32.		P	hone		
	Address Number & Street	City	State	Zip	
		-			
	Summary of Duties				
	Do you object to our contacting them?				
	Employed to month-year month-year				
	month-year month-year				
33.	Employer's name	Р	hone		
	Address				
	Number & Street	City	State	Zip	
	Summary of Duties				
	Do you object to our contacting them?				
	Employed to month-yearmonth-year				
	month-year month-year				

Have you ever been suspended or terminated, other than from an economic layoff, from any prio employment? Yes No If yes, please explain:					
Have you ever resigned from any employment position because of misconduct or unsatisfactory performance or while under investigation? Yes No If yes, explain:					

# **REFERENCES**

Please list three adults not related to you and not former employers, who have known you for more than three years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.

41.	Name	Address
	Home Phone	Business Phone
	Occupation	Relationship
42.	Name	Address
	Home Phone	Business Phone
	Occupation	Relationship
43.	Name	Address
	Home Phone	Business Phone
	Occupation	Relationship
44.		b description for the position for which you are applying and state essential job functions listed therein with or without reasonable
	Yes	No
45.	If accommodation is needed,	lease explain:

46. Person(s) to be notified in case of emergency.

Name	Address
Phone	
Name	Address
Phone	Relationship
Name	Address
Phone	

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONNAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS ON THIS QUESTIONNAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY EMPLOYMENT WITH CHANNAHON FIRE PROTECTION DISTRICT.

Dated at	Illinois, this	dav	v of	. 20	

Signature in Full

#### CHANNAHON FIRE PROTECTION DISTRICT AUTHORIZATION FORM

I, \_\_\_\_\_\_\_, hereby authorize the CHANNAHON FIRE PROTECTION DISTRICT and its agents, employees or representatives to obtain and use all information relating to my previous and current employment, education, military record, criminal conviction history, personal characteristics, fingerprints, and all other information which may bear favorably or unfavorably upon my application for employment made to the CHANNAHON FIRE PROTECTION DISTRICT. I also consent to the release to the CHANNAHON FIRE PROTECTION DISTRICT of any and all medical records prepared during the physical examination I am required to undergo for employment with the CHANNAHON FIRE PROTECTION DISTRICT. I further release from liability any person or persons providing or receiving any such information in connection with this pre-employment investigation.

I understand that I will undergo a job task test as part of the application process.

I also agree to indemnify and hold harmless the CHANNAHON FIRE PROTECTION DISTRICT, the individual trustees, employees and agents against any claim or loss whatsoever, including but not limited to attorneys' fees and any cost of defense which arises directly or indirectly out of any injury which I might sustain in the job task test and/or application process. I also covenant that for the consideration of my application, I agree not to sue the CHANNAHON FIRE PROTECTION DISTRICT, the individual trustees, employees and agents for any injury, loss or damage as a result of such process including but not limited to personal injury, wrongful death, court costs, attorneys' fees and interest, in any manner caused directly or indirectly, including the negligent acts or omissions of the CHANNAHON FIRE PROTECTION DISTRICT, its trustees as well as its employees and agents.

I hereby acknowledge and agree that as a condition of employment with the CHANNAHON FIRE PROTECTION DISTRICT, I must maintain at all times a valid State of Illinois Driver's License, of the Class required to operate all vehicles of the CHANNAHON FIRE PROTECTION DISTRICT. I do further agree that my failure to maintain said driver's license will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the District. At time of hire, I must qualify for, obtain, and maintain at all times valid minimum qualifications as specified in the job description. I do further agree that my failure to obtain and maintain the requisite certifications will constitute reason for withdrawal of a conditional offer of a conditional offer of my dismissal from employment with the District.

Signature

SUBSCRIBED and SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Public

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER.** This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.