

# VILLAGE OF FORSYTH

301 S. Route 51  
Forsyth, IL 62535

Phone: (217) 877-9445 / Fax: (217) 877-9863



## **APPLICATION FOR EMPLOYMENT**

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

**(PLEASE PRINT)**

Date of Application: \_\_\_\_\_

### **PERSONAL INFORMATION**

Name: \_\_\_\_\_  
Last First Middle

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

Phone Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

### **EMPLOYMENT DESIRED**

Position(s) Applied For: \_\_\_\_\_

How Did You Learn About Us?

Advertisement    Employment Agency    Friend    Inquiry    Relative

Other: \_\_\_\_\_

Date You Can Start: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Are You Employed Now: \_\_\_\_\_ If So, May We Contact Your Employer: \_\_\_\_\_

Do any of your friends or relatives, other than your spouse, work here?    Yes    No

If yes, state name, relationship, and position: \_\_\_\_\_

Are you available to work:    Full Time    Part Time    Temporary

Can you travel if a job requires it?    Yes    No

Are you currently on temporary leave?    Yes    No

Are you subject to recall?    Yes    No

**EDUCATION**

School & Address:

Elementary School: \_\_\_\_\_  
\_\_\_\_\_

Graduated:

Yes  No

GPA:

\_\_\_\_\_

High School: \_\_\_\_\_  
\_\_\_\_\_

Yes  No

\_\_\_\_\_

College: \_\_\_\_\_  
\_\_\_\_\_

Yes  No

\_\_\_\_\_

Degree: \_\_\_\_\_

Trade, Business, or Correspondence School: \_\_\_\_\_  
\_\_\_\_\_

Yes  No

\_\_\_\_\_

Subjects of Special Study or Research Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WORK EXPERIENCE** (List below last four employers, beginning with present or more recent.)

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

Phone Number: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Starting Position: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Starting Date: \_\_\_\_\_

Ending Position: \_\_\_\_\_ Ending Salary: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Starting Position: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Starting Date: \_\_\_\_\_

Ending Position: \_\_\_\_\_ Ending Salary: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Starting Position: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Starting Date: \_\_\_\_\_

Ending Position: \_\_\_\_\_ Ending Salary: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Starting Position: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Starting Date: \_\_\_\_\_

Ending Position: \_\_\_\_\_ Ending Salary: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Additional Information:** (Summarize special job related skills and qualifications acquired by employment or other experience.)

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**PERSONAL/PROFESSIONAL REFERENCE**

(GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.)

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Best Time to Call: \_\_\_\_\_ Occupation: \_\_\_\_\_

.....

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Best Time to Call: \_\_\_\_\_ Occupation: \_\_\_\_\_

.....

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Best Time to Call: \_\_\_\_\_ Occupation: \_\_\_\_\_

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In Case of Emergency, Notify: \_\_\_\_\_  
Name:

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

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I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notices.

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

\_\_\_\_\_  
Date

**OFFICE USE ONLY:**

Interviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
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Neatness: \_\_\_\_\_ Ability: \_\_\_\_\_

Hired:  Yes  No Start Date: \_\_\_\_\_ Start Salary Wages: \_\_\_\_\_

Position: \_\_\_\_\_  Full Time  Part Time  Temporary

For Dept.: \_\_\_\_\_

Approved:

\_\_\_\_\_  
Employment Manager

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Date: