APPLICATION FOR EMPLOYMENT

Please return to:
Village of Sugar Grove
10 S. Municipal Drive
Sugar Grove, Illinois 60554
Fax: (630) 391-7210

INSTRUCTIONS FOR COMPLETING THIS EMPLOYMENT APPLICATION
We welcome you as an applicant for employment for the Village of Sugar Grove. It is the policy and intent of the Village of Sugar Grove to provide equal opportunity in employment to all persons. This policy applies to all types of full-time, part-time, temporary, and seasonal employment. All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible employment with the Village of Sugar Grove. Please complete the information as requested in this application. Do not submit a resume in place of completing any part of this application, although you are welcome to attach your resume. If you are an individual with a disability and require assistance or accommodation in filling out this application, please contact the Personnel Department at (630) 391-7203.

Please identify the specific positions(s) from our open job listings for which you are applying.			
1.		2.	
☐ Full-Time ☐ Part-Time		Date Available:	
☐ Temporary ☐ Summer		Minimum Salary: per	hr/ yr

GENERAL INFORMATION

Last Name:	First Name:	Middle Initial:

Home Phone:	Work Phone:	Email:

Present Permanent Address:	City:		
State: Zip Code:	County:	How long lived there?	
Driver's License Number:	State: Class:	Expiration Date:	
Is this license currently valid? ☐ Yes ☐ No	Do you have a valid CDL? ☐ Yes ☐ No		
Are you related to any employee of the Village of Sugar Grove or an elected official? ☐ Yes ☐ No			
If yes, state their name and relationship to you:			

Have you ever been previously employed by the Village of Sugar Grove? ☐ Yes ☐ No	
When?	In what position?
Were you referred by a Village of Sugar Grove employee? ☐ Yes ☐ No	
If yes, please name the employee:	
Are you at least 18 years of age? ☐ Yes ☐ No	Are you over 70 years of age? ☐ Yes ☐ No

EDUCATIONAL INFORMATION

Type of School	Name and Mailing Address of School	Major	Year Completed	Degree Earned (If yes, indicate degree)
High School				Yes No
College/University				Yes No
Graduate				Yes No
Technical/Business /Trade School				Yes No
Other				Yes No

If you are not a high school graduate, have you passed the GED test? ☐ Yes ☐ No

List any correspondence courses, special courses, seminars, workshops, etc., that might relate to this position:

_____

_____

List any licenses or certificates relating to this position:

_____

_____

List any other skills/experience that relate to this position (Typing, Software Skills, Heavy Machinery, etc.):

_____

_____

List professional, trade, business or civic activities or associations to which you belong. (Please exclude memberships that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.):

_____

_____

EMPLOYMENT HISTORY	
Please begin with your present or most recent employer and provide all the information requested. Please do not write, "see resume."	
May the Village of Sugar Grove contact your current employer? ☐ Yes ☐ No	
Employer:	Phone Number:
Address:	City: State: Zip:
Dates of Employment:	Reason for Leaving:
Title:	Supervisor's Name:
	Hours Per Week:
Duties:	

Employer:	Phone Number:
Address:	City: State: Zip:
Dates of Employment:	Reason for Leaving:
Title:	Supervisor's Name:
	Hours Per Week:
Duties:	

Employer:	Phone Number:
Address:	City: State: Zip:
Dates of Employment:	Reason for Leaving:
Title:	Supervisor's Name:
	Hours Per Week:
Duties:	

Employer:	Phone Number:
Address:	City: State: Zip:
Dates of Employment:	Reason for Leaving:
Title:	Supervisor's Name:
	Hours Per Week:
Duties:	

PROFESSIONAL REFERENCES:

Please list three references that are familiar with your work history and experience. Do not list relatives, friends or personal references.

Name:	Company:
Business Relationship	Years Known:
Phone Number:	

Name:	Company:
Business Relationship	Years Known:
Phone Number:	

Name:	Company:
Business Relationship	Years Known:
Phone Number:	

APPLICANT AGREEMENT: RELEASE AND CERTIFICATION

Please read before signing. Questions regarding this statement should be directed to any employment interviewer prior to signing.

I hereby certify that all answers to the questions herein are true, accurate and complete to the best of my knowledge. I agree and understand that any false statements, misrepresentations or omissions of fact contained in this application (or any other accompanying or required documents) may cause the rejection of this application or termination of employment without notice or benefits, regardless of how or when discovered. I understand that all candidates hired are subject to satisfactory completion of a probationary period and a post-offer, pre-employment physical exam and drug screen. I authorize the investigation of all statements and information contained in this application. I release the Village of Sugar Grove from any and all liability that might result from conducting a background investigation. I also release from liability anyone supplying information pursuant to such investigation. I understand that this application is not, nor is it intended to be, a contract of employment. If hired, I agree to abide by all applicable Village of Sugar Grove rules and regulations. I acknowledge that I have read the above statements and hereby grant permission to verify the information supplied on this application for employment and employment related documents I have provided

PRINT NAME:

SIGNATURE: DATE: