Jo Daviess County, Illinois

Application for Employment

TO APPLICANT: We deeply appreciate your interest in our organization. Thank you for taking the time to complete this application.

The Civil Rights Act of 1965 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency, including but not limited to information regarding credit data, personal character, general reputation and mode of living. **This list, however, is not exhaustive of the grounds on which discrimination is prohibited.**

PERSONAL

Date _____ Position(s) applied for _____

Name _____
Last First Middle

Address _____
No. Street City State Zip

Driver's License No. _____ Telephone No. _____

Are you legal eligible for employment in the U.S.A.? ☐ Yes ☐ No. If hired, you are required to submit proof of your eligibility to work in the U.S.A.

Are you over the age of eighteen? ☐ Yes ☐ No. If no, hire is subject to verification that you are of minimum legal age.

In case of emergency, please contact:

Name _____Relationship_____Phone_____

Have you ever been employed by Jo Daviess County? ☐ Yes ☐ No. If yes, when? _____

Relatives employed by Jo Daviess County _____

Have you ever served in the Armed Forces? ☐ Yes ☐ No. If yes, which branch? _____

What date are you available to begin work? _____

EMPLOYMENT HISTORY

List below present and past employment, beginning with your most recent

Name & Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							

Name & Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							

Name & Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							

Name & Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							

PERSONAL REFERENCES (Not Former Employers or Relatives)

Name and Occupation	Address	Phone number

RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed				Did You Graduate?	List Diploma or Degree
Elementary			5	6	7	8	☐ Yes ☐ No	
High			1	2	3	4	☐ Yes ☐ No	
College			1	2	3	4	☐ Yes ☐ No	
Other (Specify)			1	2	3	4	☐ Yes ☐ No	

May we telephone you to follow up on this application at work? ☐ Yes ☐ No

If yes, what is the best time to call? _____

What is your business telephone number? _____

PLEASE READ AND SIGN BELOW

The facts set forth in my 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 decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the County Board and the County Administrator has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer.

_____
Signature of Applicant

AUTHORIZATION FOR BACKGROUND AND REFERENCE CHECK

I authorize the County to thoroughly investigate my references, work record, education, criminal conviction record and any other matters relevant to my suitability for employment. I also authorize my former employers to disclose to the County, or to anyone acting on behalf of the County, any and all of my employment records, including my disciplinary reports and letters of reprimand, without giving me notice of such disclosure. I hereby fully release and discharge the County, my former employers, their respective officers, employees and agents, and all other persons and entities from any and all claims, demands, and liabilities arising out of or in any way relating to such investigation or disclosure.

_____ _____
Applicant's Signature Date