



VILLAGE OF CRAINVILLE

1200 Marilyn Drive - P.O. Box 105
Carterville, IL 62918
Phone (618) 985-3322 Fax (618) 985-6401
www.crainville.net

Employment Application

Today's Date: _____

Please print all information requested except signature.

Name: _____
Last First Middle Maiden

Present Address: _____
Number Street City State ZIP

How long at present address? _____ Phone number(s): _____

If under 18 years old, please list age: _____ Position applied for: _____

Salary desired: _____ Date available to begin work: _____

Days/Hours available to work:
No Preference _____ Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____ Sunday _____

How many hours can you work weekly? _____ If necessary, can you work nights? _____

Type of employment desired: _____ Full-time only _____ Part-time only _____ Full or part-time

Background Check

Have you ever been convicted of a crime? _____ No _____ Yes

If yes, explain number of convictions (s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Military

Have you ever been in the Armed Forces? _____ Are you in the National Guard? _____

Military Specialty: _____ Date Entered: _____ Discharge Date: _____

Driving Information

Do you have a driver's license? ___Yes ___No State of issue: _____ Exp. Date: _____

Driver's license number: _____ Operator _____ CDL _____ Chauffeur

What is your means of transportation to work? _____

Have you had any accidents during the past 3 years? _____ How Many? _____

Have you had moving violations during the past 3 years? _____ How Many? _____

Education

Type of School	Name of School	Location	Number of years completed	Major & Degree
High School				
College				
Business or Trade School				
Professional School				
Other				
Other				

Work Experience

Please list your experience for **the past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

<i>Name of employer</i>	<i>Name of last supervisor</i>	<i>Employment dates</i>	<i>Pay or salary</i>
<i>Address</i>		<i>From</i>	<i>Start</i>
<i>City, State, ZIP</i>		<i>To</i>	<i>Final</i>
<i>Phone</i>			
<i>Reason for leaving (be specific)</i>			
<i>List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this job.</i>			

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<i>Phone</i>			
<i>Reason for leaving (be specific)</i>			
<i>List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this job.</i>			

May we contact your present employer? ____ Yes ____ No

Did you complete this application yourself? ____ Yes ____ No

If no, who did? _____

Please list two references other than relatives or previous employers.

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

☐ ***Check if more room is needed for listing of previous employers and provide additional information on back of this application.***

I certify that my answers are true and complete to the best of my knowledge. I understand that I may be tested for illegal drugs. If this application leads to employment, I understand that false or misleading information on my application or interview may result in my release.

Signature

The Village of Crainville is an equal opportunity employer. Qualified applicants receive consideration for employment without discrimination because of race, color, national origin, sex, age, marital status, veteran status, sexual orientation or the presence of disability.