

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE OF APPLICATION: _____

Name: _____
Last
First
Middle

Address: _____
Street
(Apt)
City/State
Zip

Alternate Address: _____
Street
City/State
Zip

Contact Information: _____
()
()
Email
Home Telephone
Mobile Telephone

How did you learn about our company?

POSITION SOUGHT: _____ **Available Start Date:** _____

Desired Pay Range: _____ **Are you currently employed?** _____
Hourly or Salary

EDUCATION

	Name and Location	Graduate? – Degree?	Major / Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc...			
Other Education			

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.

PREVIOUS EXPERIENCE

Please list beginning from most recent

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

DRIVING HISTORY

Can you operate an automobile? Yes No

Do you possess a valid operator's or chauffeur's license? Yes No

If "yes", date of expiration _____

Drivers License number _____

Have you ever been refused an operator's or chauffeur's license by any state? Yes No

If "yes", explain

Have you ever had an operator's license in any other state? Yes No

Was your license ever suspended or revoked? Yes No

If "yes" explain

Has your license ever been placed on probation? Yes No

If "yes" explain

CRIMINAL HISTORY

Have you ever been convicted? Yes No

If "yes" explain : Date _____ By whom (Police Agency) Crime Charged
Disposition

Have you ever been placed on probation? Yes No If "yes" explain:

Have you ever been required to pay a fine in excess of \$25.00? Yes NO If "yes" explain

Have you ever been reported as a missing person? Yes No If "yes" explain details including jurisdiction, dates and outcome :

Have you ever been the victim of a crime? Yes No

Was this crime reported to the Police? Yes No.

If you were a victim, explain:

Have you ever been fingerprinted by a police agency other than for an arrest? Yes No

If "yes" explain: _____

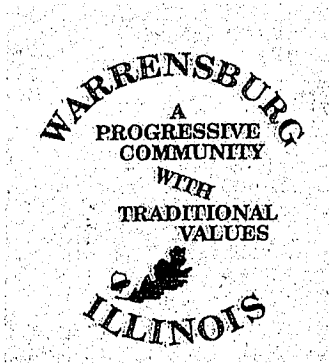
Agency	Date	Purpose
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List all traffic citations you have received

Location (city)	Approx. Date	Nature of violation	Disposition
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Are there any warrants, traffic or otherwise now pending against you? Yes No

If "yes" explain: _____



Village Of Warrensburg
P.O. Box350
Warrensburg, Illinois 62573
Phone: (217) 672-3222
Fax: (217) 672-3771

Village of Warrensburg Authorization

I authorize and empower the Village of Warrensburg, Village of Warrensburg Trustees, any consumer reporting agency, and the Warrensburg Police Department for this purpose, now or subsequently, to obtain, prepare, use and furnish information concerning my current and former employment, education, credit, general reputation, health, criminal history, personal characteristics and mode of living, through correspondence or personal interviews with neighbors, friends, or associates or others with whom I am acquainted or who may have knowledge concerning any of the above items.

Signature: _____

Date: _____