



PROSPECT HEIGHTS PARK DISTRICT

(847) 394-2848
Fax (847) 394-7799

110 W. Camp McDonald Road, Prospect Heights, Illinois 60070

APPLICATION FOR EMPLOYMENT

NAME: _____ SS #: _____
(LAST) (FIRST) (MIDDLE)

PRESENT (COLLEGE) ADDRESS:

(STREET) (CITY, STATE ZIP CODE) (PHONE)

PERMANENT ADDRESS:

(STREET) (CITY, STATE ZIP CODE) (PHONE)

EMAIL ADDRESS:

Are you eligible to work in the United States? _____ YES _____ NO
(Proof of eligibility will be required in the event an offer of employment is extended)

If you are under 16 years of age, can you provide required proof of your eligibility to work?
_____ YES _____ NO

Will you have transportation to and from work? _____ YES _____ NO

Do you have a valid driver's license?: _____ YES _____ NO

If yes, Driver's License Number: _____

What position are you applying for?: _____

Full Time / Part Time / Seasonal (circle one)

When are you available to begin work?: _____

How many hours & days per week will you be available: _____

Have you ever worked for Prospect Heights Park District and/or Old Orchard Country Club before? ____Y ____N

If so, when? _____

FORMER EMPLOYERS: List the last 3 employers with the most recent first.

NAME & ADDRESS OF EMPLOYER	SUPV. NAME & TITLE	DATES EMPLOYED	PHONE NO	RATE PAY	REASON FOR LEAVING	MAY WE CONTACT?
-------------------------------	-----------------------	-------------------	-------------	-------------	-----------------------	--------------------

Volunteer Experience: Please list below:

Do you have previous recreational/park maintenance work experience? If so, please list:

Do you have any special needs that our agency should be aware of? _____YES _____NO

REFERENCES (OTHER THAN RELATIVES)			
-----------------------------------	--	--	--

NAME	ADDRESS	CITY	PHONE NUMBER
------	---------	------	--------------

EDUCATION INFORMATION				
-----------------------	--	--	--	--

LEVEL	SCHOOL-ADDRESS & CITY	AREA OF STUDY	YRS COMPLETED	TITLE OR DEGREE
-------	-----------------------	---------------	---------------	-----------------

GRADE

HIGH

COLLEGE

OTHER

Why would you like to be employed by our Park District? _____

Have you ever been convicted of a felony? If so when, where, and what was the nature of the offense? _____



**PROSPECT HEIGHTS
PARK DISTRICT**

(847) 394-2848
Fax (847) 394-7799

110 W. Camp McDonald Road, Prospect Heights, Illinois 60070

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at-will" nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause. It is further understood that this "at-will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

By signing this application, I authorize the Prospect Heights Park District to use the information provided to conduct an Illinois State background check using the Conviction Information Name Check Request Form. In certain circumstances, a Fingerprint Background Check, Drug Test and/or a Driver's Abstract may also be conducted.

Signature of Applicant: _____ Date: _____

OFFICE USE ONLY

DATE OF INTERVIEW: _____

INTERVIEWED BY: _____

COMMENTS: _____

