

VILLAGE OF HAMPTON, ILLINOIS APPLICATION FOR EMPLOYMENT

Position You Are Applying For			Date of Birth MM DD YY		
Last Name		First	Middle		Social Security Number
Mailing Address			Phone Numbers (Include Area Code) Daytime ()		
City		State	Zip		Evening ()
U. S. Citizen ? Yes <input type="checkbox"/> No <input type="checkbox"/> Country of your citizenship ➤					
Valid Driver's License ? No <input type="checkbox"/> Yes <input type="checkbox"/> D.L. #			State		Class
Has your driver's license ever been suspended or revoked in any state? No <input type="checkbox"/> Yes <input type="checkbox"/> (If Yes, give month and year, state and reason for suspension or revocation)					
MM/YY		State		Reason	
EDUCATION - Mark highest level completed					
Some HS <input type="checkbox"/>		HS/GED <input type="checkbox"/>		Associate <input type="checkbox"/>	
Bachelor <input type="checkbox"/>		Master <input type="checkbox"/>		Doctoral <input type="checkbox"/>	
Last High School (HS) or GED School, List the school's name, city, state, zip and year diploma or GED received.					
Colleges and Universities attended. <i>Do not attach copies of transcripts unless requested.</i>					
Name			City		State
Total Credits Earned Semester Quarter		Majors		Degree (if any) Year Received	
Name			City		State
Total Credits Earned Semester Quarter		Majors		Degree (if any) Year Received	
Name			City		State
Total Credits Earned Semester Quarter		Majors		Degree (if any) Year Received	
OTHER QUALIFICATIONS Job related training courses (give title and year). Job related skills (other languages, computer software hardware, tools machinery, typing speed, etc.). Job related honors, awards and special accomplishments (publications, memberships in professional/honor societies, leadership activities, public speaking and performance awards). Give dates, but do not attach any documents unless requested. Use additional sheets if necessary.					

WORK HISTORY - List your past employers and work experience beginning with the most recent and working backwards. Use additional sheets if necessary. Do not attach job descriptions.

Job Title				
From (MM/YY)	To (MM/YY)	Salary \$	Week/Month/Year per	Hours per week
Employer's Name		Supervisor's Name		
Address		Supervisor's Work Phone ()		
Describe your duties and accomplishments				

Job Title				
From (MM/YY)	To (MM/YY)	Salary \$	Week/Month/Year per	Hours per week
Employer's Name		Supervisor's Name		
Address		Supervisor's Work Phone ()		
Describe your duties and accomplishments				

Job Title				
From (MM/YY)	To (MM/YY)	Salary \$	Week/Month/Year per	Hours per week
Employer's Name		Supervisor's Name		
Address		Supervisor's Work Phone ()		
Describe your duties and accomplishments				

May we contact your current supervisor ?

Yes No ➤ If we need to contact your current supervisor before making an offer, we will contact you first.

Do you have any relatives that were or are currently employed by the Village of Hampton? No Yes

If Yes, give Name, relationship and dates of employment

MILITARY SERVICE List any Military Service performed. *Do not attach DD214 unless requested.*

Branch	From (MM/YY)	To (MM/YY)	Type of Discharge	Rank at Discharge
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Occupational Specialty

REFERENCES - List 3 references that are not related to you. Include all information.

1. Name	Address
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Occupation	Phone Numbers Daytime ()	Evening ()
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2. Name	Address
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Occupation	Phone Numbers Daytime ()	Evening ()
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3. Name	Address
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Occupation	Phone Numbers Daytime ()	Evening ()
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APPLICANT CERTIFICATION - All applications *must* be signed and dated to be considered.

I certify that to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me or for terminating my employment after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated. I understand that my background may be investigated by the Village of Hampton or other agencies at the request or employ of the Village of Hampton.

Signature of Applicant

Date Signed