

Marion  *County*
Park District
 EMPLOYMENT APPLICATION

APPLICANT INFORMATION		
Last Name:		
First Name:		MI:
Street Address:		Apt/Unit:
City:	State:	Zip:
Phone (home):	Phone (cell):	
E-mail address:		
Position applied for:		
Date available:	Salary desired:	
How did you hear about this position at the Marion County Park District?		

Are you authorized to work in the United States?	Yes : <input type="checkbox"/>
No <input type="checkbox"/> (please explain):	
Are you under the age of 18? If yes, a copy of your school board work permit will be required: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you ever been terminated for cause or asked to resign from a position?	No: <input type="checkbox"/>
Yes <input type="checkbox"/> (please explain):	
Do you have a valid driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you ever been convicted, of or entered a plea of guilty or no contest to, any felony or misdemeanor (other than a minor traffic violation)? No: <input type="checkbox"/> Yes : <input type="checkbox"/>	
If you answered "yes" to having been convicted, or of entering a plea of guilty or no contest to, any felony or misdemeanor, please describe the details including nature, circumstances, and date of the offense. A conviction will not necessarily be a bar to employment. The nature of the offense, when it occurred and its job-relatedness will be considered:	

EDUCATION

High School:

Did you graduate: Yes No

GED:

College/Vocational School/Institution:

City/State:

Type of Degree/Certification/License:

Major Area of Study or Course:

Did you graduate: Yes No

If no degree, highest level completed:

College/Vocational School/Institution:

City/State:

Type of Degree/Certification/License:

Major Area of Study or Course:

Did you graduate: Yes No

If no degree, highest level completed:

List any memberships or associations you belong to that are relevant to this position:

PREVIOUS EMPLOYMENT

Employer name:

Address:

Job Title:

Dates employed - From: To:

Supervisor:

Phone #:

May we contact previous supervisor for a reference: Yes No

Starting salary:

Ending salary:

Type of work (FT, PT, Temp, Seasonal):

Reason for Leaving:

Description of duties/responsibilities:

Employer name:

Address:

Job Title:

Dates employed - From: To:

Supervisor:

Phone #:

May we contact previous supervisor for a reference: Yes No

Starting salary:	Ending salary:	Type of work (FT, PT, Temp, Seasonal):
Reason for Leaving:		
Description of duties/responsibilities:		
Employer name:		
Address:		
Job Title:	Dates employed - From:	To:
Supervisor:	Phone #:	
May we contact previous supervisor for a reference: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Starting salary:	Ending salary:	Type of work (FT, PT, Temp, Seasonal):
Reason for Leaving:		
Description of duties/responsibilities:		

Work preferences: <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Nights <input type="checkbox"/> Weekends <input type="checkbox"/> Any
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REFERENCES	
<i>Please list three professional references</i>	
Full Name:	
Relationship:	
Company:	
Address:	
Phone (business):	Phone (personal):
E-mail Address:	
Full Name:	
Relationship:	
Company:	
Address:	
Phone (business):	Phone (personal):
E-mail Address:	
Full Name:	

Relationship:	
Company:	
Address:	
Phone (business):	Phone (personal):
E-mail Address:	

APPLICANT'S CERTIFICATION AND AGREEMENT

The Marion County Park District is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, age, sex, marital status, national origin, disability or handicap, or veteran status.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for the Marion County Park District to hire me. If I am hired, I understand that either the Marion County Park District or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of the Marion County Park District has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to the Marion County Park District true and complete information on this application. No requested information has been concealed. I authorize the Marion County Park District to contact references provided for employment reference checks and to conduct a background check. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

By signing below, I certify that I have read and agree with these statements.

Signature:	Date:
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