

City of Anna

Employment Application

103 Market St., Anna, IL 62906

Applicant Information

Full Name:			Date:
<i>Last</i>	<i>First</i>	<i>M.I.</i>	
Address:			
<i>Street Address</i>		<i>City</i>	<i>State</i>
<i>ZIP</i>			
Circle One:	Position Applied For: Full Time Part Time Full Time/Part Time Police Officer Fire Fighter Clerical Laborer Other:		
Phone #: ()		Driver's License #:	
Date Available:	Social Security #:	Salary: \$	

Referred By:

Are you a citizen of the United States? YES NO	If no, are you authorized to work in the U.S.? YES NO
Have you ever worked for this company? YES NO	If yes, when?
Have you ever been convicted of a felony? YES NO	If yes, explain -

Education

High School:		Address:	
From:	To:	Did you graduate?	YES NO
College / Other:		Address:	
From:	To:	Did you graduate?	YES NO

References

Please list three

Name:		Phone #: ()	
Address:			
<i>Street Address</i>		<i>City</i>	<i>State</i>
<i>ZIP</i>			
Name:		Phone #: ()	
Address:			
<i>Street Address</i>		<i>City</i>	<i>State</i>
<i>ZIP</i>			
Name:		Phone #: ()	
Address:			
<i>Street Address</i>		<i>City</i>	<i>State</i>
<i>ZIP</i>			

Previous Employment

Company:		Phone #: ()
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your previous supervisor for a reference? YES NO <i>If no, explain</i>		

Company:		Phone #: ()
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your previous supervisor for a reference? YES NO <i>If no, explain</i>		

Company:		Phone #: ()
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary \$
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your previous supervisor for a reference? YES NO <i>If no, explain</i>		

Consent / Waiver and Signature

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

Background Screen Release: *I hereby authorize and give consent for the City of Anna, to obtain information regarding myself. This includes the following: Social Security / Drivers License Verification, Criminal Background records / information and Address check. I the undersigned, authorize this information to be obtained either in writing, electronic transmission or via telephone, in connection with my employment application.*

Drug / Alcohol Testing: *If offered / accepted employment with the City of Anna, you may be required to take a test for drug / alcohol use and submit to a medical examination.*

I authorize the City of Anna, to thoroughly investigate all statements contained in this application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation, without giving me prior notice of such disclosure. In addition, I release the City of Anna, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:	Date:
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