## KENDALL COUNTY SHERIFF'S OFFICE APPLICATION

\*If yes, please explain



Kendall County Sheriff's Office 1102 Cornell Lane Yorkville, IL 60560

Kendall County Sheriff's Office is an equal opportunity employer. We consider applicants for all position without regard to race, color, religion, creed, ancestry, gender, pregnancy, national origin, age, disability, genetic information, marital, military or veteran status, sexual orientation, or any other basis prohibit by federal, state and/or local laws, regulations and ordinances. We are committed to complying with the Americans with Disabilities Act. If an applicant requires a reasonable accommodation for purposes of completing the job application process, please contact the HR Manager of the Kendall County Sheriff's Office.

		(PLEASI	E PRINT)				
Position Applied For				Date of A	Application		
How Did	You Learn About Us?						
	Advertisement		Relative/Frie				
	Walk-in		County Web	site			
	Sheriff's Office Social Media		Other			_	
Last Name	First	Name			Middle Na	ame	
Address	Street	City		State		Z	ip Code
Telephone N	lumber(s)						
Email Addres	SS						
161		0			7 V.	□ N.	
if nired, ca	an you furnish proof that you are over 18 years o	ਸ age?		l	Yes	☐ No	
Have you	ever filed an application with us before?			[	Yes	☐ No	
			If Yes, give date	e			<del></del>
Have you	ever worked for Kendall County before?			[	Yes	□ No	
•	·		If Yes, give date	e			
Are you at	ole to perform the essential functions of this job			[	Yes	☐ No	
with or wit	hout reasonable accommodations?						
Are you cu	urrently employed?			[	Yes	☐ No	
May we co	ontact your present employer?			[	Yes	☐ No	
Are you le	gally authorized to work in the United States?			[	Yes	☐ No	
On what d	ate would you be available to start work?						<del> </del>
Are you av	vailable to work: ☐ Full Tin	ne [	☐ Part Time	□ Те	mporary	☐ Shift work	
Are you w	illing to take a drug test?			[	Yes	☐ No	
Can you tr	ravel if the job requires it?			[	Yes	☐ No	
-	been convicted of a crime other than a			[	Yes	☐ No	
traffic viola	ation within the last 7 years?						

<sup>\*</sup> Pursuant to the Illinois Juvenile Court, an applicant is not obligated to disclose expunged juvenile records of adjudication, conviction or arrest. Also you are not obligated to disclose sealed, expunged or impounded records of conviction or arrest pursuant to Section 12 of the Illinois Criminal Identification Act, 20 ILCS 2630/12. A "yes" answer will not disqualify an applicant for consideration for a position. Such information is only relevant in determining whether the conviction is directly related to the position for which you are applying.

	Name and Addre	ess of School	Years Cor	mpleted	Diploma/ Degree
High School			9 10 11 12		
Undergraduate College			1 2 3 4		
Graduate Professional		1 2 3 4			
Trade or Correspondence					
Other (Specify)					
Indicate an	y languages other	than English you ca	an speak	read	and/or write
SPEAK					
READ					
WRITE					
• •	• •	prenticeship, skills e relevant to the pos			
SPECIALIZE	D SKILLS		Check Skil	lls/Equipm	nent Operated
	D SKILLS  ascription System	Fax	Check Skil		nent Operated

## **EMPLOYMENT EXPERIENCE**

Please begin with current or most recent employer. Do not exclude any employment. Include any applicable temporary employment. Please explain any gaps in employment. Please note, you are not required to include prior employment that

indicates race, colo	or, religion, sex, etc.				
Employer		Dates Employed	Work Performed		
Address		<u>From</u>			
Telephone Number(s)		$\overline{}$			
		<u>To</u>			
Job Title	Supervisor				
Reason for Leaving			May KCSO contact:		
			Yes or No		
Employer		Dates Employed	Work Performed		
, ,		From From			
Address		_			
Telephone Number(s)		<del></del>			
Job Title	Supervisor	<u>To</u>			
Reason for Leaving			May KCSO contact:		
			Yes or No		
			· · · · · · · · · · · · · · · · · · ·		
Employer		Dates Employed	Work Performed		
Address		<u>From</u>	1		
Telephone Number(s)		——			
	<u>.</u>	<u>To</u>			
Job Title	Supervisor	_			
Reason for Leaving			May KCSO contact:		
			Yes or No		
Employer			• · · · · · · · · · · · · · · · · · · ·		
Employer		Dates Employed From	Work Performed		
Address		110111			
Telephone Number(s)		—			
	Io	<u>To</u>			
Job Title	Supervisor				
Reason for Leaving			May KCSO contact: Yes or No		

## **REFERENCES** - Please list three references who are not your previous employers or relatives NAME **ADDRESS** PHONE NUMBER State any additional information you feel may be helpful to us in considering your application APPLICANT STATEMENT By signing my name below, I certify that all information I have provided on this application, in any other employment documents, and/or during my interview(s) in order to apply for and secure work with the employer is true, complete, and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient and just cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered. I expressly authorize, without reservation, the Kendall County Sheriff's Office ("KCSO" or "employer"), its representatives, employees and agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, job interview, or any other documents that I submit during the application process. I waive any right I may have to be notified by any individuals and organizations named in this application prior to their release of any information to KCSO, and I hereby waive and release all claims, judgments, liabilities and damages (including, but not limited to attorneys' fees and costs) that I may incur or sustain as a result of the individuals' and organizations' release of information to KCSO. By signing my name below, I also hereby waive and release all claims, liabilities, judgments, and damages (including, but not limited to attorneys' fees and costs) against KCSO, Kendall County and their respective board members, elected officials, agents, employees and assigns that I may incur or sustain as a result of KCSO contacting and obtaining information from any individual, governmental body, employer, and/or other organization as part of this application process. KCSO is an equal opportunity employer. I understand that KCSO does not discriminate against applicants and/or employees on the basis of race, color, religion, gender, national origin, age, disability, veteran status, sexual orientation, pregnancy, marital status, ancestry, military status, genetic information and/or any other basis prohibited by federal, state and/or local laws, regulations and ordinances. I understand that this application remains current for only one year from the date KCSO receives my application. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and complete a new application. I understand that certain information I provide to KCSO during the application process may be provided to the public as required by the Illinois Freedom of Information Act. I also understand that if I am offered a position with KCSO, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed. If I am offered a position with KCSO and I accept that position, I will be required to provide proof of identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard prior to performing any work for KCSO. Failure to provide such legally required information will result in withdrawal of the employment offer or termination of employment if already employed. I understand that this employment application in no way creates a contract of employment, express or implied, with the Kendall County Sheriff's Office and/or Kendall County, Illinois. I further understand that, should an offer of employment be extended to me, such employment with KCSO is employment at will for no specified duration and may be terminated by either KCSO or me at any time subject to the terms of any applicable collective bargaining agreement. I understand that none of the documents, policies, procedures, actions or statements of KCSO or its representatives during the application process is deemed a contract of employment express or implied. I understand that no individual representative of KCSO has the authority to enter into any contract of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the Kendall County Sheriff. In consideration for employment with KCSO, if employed, I agree to conform to the rules, regulations, policies and procedures of KCSO at all times and understand that such obedience is a condition of employment. DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Date:

Signature of Applicant