KENDALL COUNTY SHERIFF'S OFFICE APPLICATION



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.

| | | (PLEAS | SE PRINT) | | |
|----------------------|---------------------------------------|---------------------|---------------------|-------------|--------------|
| Position Applied For | | · | Date of Application | | |
| How Did | You Learn About Us? | | | | |
| | Advertisement | | Relative/Frie | end | |
| | Walk-in | _ | County Web | | |
| | Sheriff's Office Social Media | | Other | | |
| Last Name | | First Name | | Middle Na | ame |
| Address | Street | City | | State | Zip Code |
| | | · | | | · |
| Telephone Nu | umber(s) | | | | |
| Email Addres | s | | | | |
| If hired, ca | n you furnish proof that you are ove | er 18 years of age? | ? | ☐ Yes | □ No |
| Have you e | ever filed an application with us bef | ore? | If Yes, give date | ☐ Yes | \square No |
| Have you e | ever worked for Kendall County bef | ore? | If Yes, give date | ☐ Yes | □ No |
| Are you ab | le to perform the essential function | s of this job | | ☐ Yes | □ No |
| with or with | nout reasonable accommodations? | | | | |
| Will you be | able to work the position's require | ☐ Yes | □ No | | |
| May we co | ntact your present employer? | ☐ Yes | □ No | | |
| Are you leg | gally authorized to work in the Unite | ☐ Yes | □ No | | |
| On what da | ate would you be available to start v | work? | | | |
| Are you av | ailable to work: | ☐ Full Time | □ Part Time | □ Temporary | ☐ Shift work |
| Are you wil | ling to take a drug test? | | | □ Yes | □ No |
| Can you tra | avel if the job requires it? | | | ☐ Yes | □ No |

| | 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) | | | |
| 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 | | | T |
| 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 ACKNOWLEDGEMENTS AND DISCLAIMER 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