

Last Employer	<u>Employed</u> From mo/yr	<u>Your Title or Position</u>	<u>Reason for Leaving</u>
_____ Name of Employer	_____ To mo/yr	_____ <u>Name & Title of</u> <u>Supervisor</u>	
_____ Address	_____ To mo/yr	_____ <u>Name & Title of</u> <u>Supervisor</u>	
_____ Phone	_____ To mo/yr	_____ <u>Name & Title of</u> <u>Supervisor</u>	
Last Employer	<u>Employed</u> From mo/yr	<u>Your Title or Position</u>	<u>Reason for Leaving</u>
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_____ Address	_____ To mo/yr	_____ <u>Name & Title of</u> <u>Supervisor</u>	
_____ Phone	_____ To mo/yr	_____ <u>Name & Title of</u> <u>Supervisor</u>	
Last Employer	<u>Employed</u> From mo/yr	<u>Your Title or Position</u>	<u>Reason for Leaving</u>
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_____ Address	_____ To mo/yr	_____ <u>Name & Title of</u> <u>Supervisor</u>	
_____ Phone	_____ To mo/yr	_____ <u>Name & Title of</u> <u>Supervisor</u>	

May we contact your current and previous employers? Yes No
 If no, please explain:

 Please indicate any actual experience, special training, and/or qualifications that you have which you feel are relevant to the position for which you are applying.

 If hired, can you furnish proof that you are over 18 years of age? Yes No

Are you able to perform the essential functions of this job with or without reasonable accommodation?
 Yes No

Will you be able to work the position's required work hours? Yes No

Will you be able to work on-site? Yes No

EDUCATIONAL BACKGROUND

School Name	Years Completed	Diploma/Degree	School Name
High School:			
College/University:			
Graduate/Professional:			
Trade or Correspondence:			
Other:			

PROFESSIONAL REFERENCES

Please list three professional references who are **not your** previous employers or relatives.

Name	Occupation	Address (Street, City and State)	Telephone Number	Number of Years Known

ACKNOWLEDGMENTS AND DISCLAIMER

By signing my name below, I certify that all information provided in this application, my resume, other employment application documents, and interview are true and complete to the best of my knowledge. I understand that any misrepresentations or omissions in my application, resume, other employment documents, or interviews(s) may be cause for rejection of my application, or may be cause for subsequent dismissal at any time if hired by Kendall County Forest Preserve District (hereinafter collectively referred to as the "District")

I understand that the District is not obligated to provide employment and that I am not obligated to accept employment should an offer of employment be made to me. **NOTHING IN THIS APPLICATION, OR IN ANY PRIOR OR SUBSEQUENT ORAL OR WRITTEN STATEMENT, IS INTENDED TO OR DOES CREATE ANY CONTRACT OF EMPLOYMENT. SHOULD THIS APPLICATION AND THE PROCESS SURROUNDING THIS APPLICATION RESULT IN MY EMPLOYMENT WITH THE DISTRICT, I UNDERSTAND THAT I WOULD BE HIRED AS AN EMPLOYEE AT WILL (SUBJECT TO THE TERMS OF AN APPLICABLE COLLECTIVE BARGAINING AGREEMENT, IF ANY) AND NOTHING IN THIS APPLICATION WOULD RESTRICT MY RIGHT AS AN EMPLOYEE OR THE DISTRICT'S RIGHT AS AN EMPLOYER TO TERMINATE MY EMPLOYMENT AT ANY TIME.**

Kendall County Forest Preserve District is an equal opportunity employer and does not discriminate against applicants and/or employees on the basis of their race, color, religion, sex, pregnancy, sexual orientation, national origin, marital status, age, ancestry, military status, veteran status, disability, genetic information, pregnancy and/or any other basis prohibited by state, federal and/or local laws, regulations and ordinances.

If selected for the position and upon commencement of employment, I understand that I will be required to submit verification that I am legally authorized to work in the United States as required by federal law.

I understand and agree that all information furnished in this application may be verified by the District or its authorized representatives. I waive any right I may have to be notified by any individuals and organizations named in this application prior to the release of any information to Kendall County Forest Preserve District. I further authorize all individuals and organizations named in this application to give Kendall County Forest Preserve District and its authorized agents all information relative to such verification. I hereby release such individuals and organizations and Kendall County Forest Preserve District from any and all liability for any claim or damage resulting therefrom. If the District determines that I am qualified for the position, and I have been notified that I have been selected for an interview or, if there is no interview, I have been made a conditional offer of employment with the District, I may be required to submit to a criminal history background check, employment verification, and/or reference check. By signing my name below, I affirm my understanding that certain offenses may disqualify me from employment in a particular position with Kendall County Forest Preserve District to the extent permitted by applicable law.

BY SIGNING BELOW, I HEREBY CERTIFY THAT I HAVE READ AND AGREE TO ALL OF THE ABOVE. BY SIGNING MY NAME BELOW, I ALSO HEREBY AFFIRM THAT ALL OF THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Signature of Applicant

Date