



APPLICATION FOR EMPLOYMENT

City of Joliet
JOB HOTLINE: (815) 724-4038

Return form to Human Resources Dept.
150 W. Jefferson Street
Joliet, IL 60432

It is the policy and intent of the City of Joliet to provide equal opportunity in employment to all persons regardless of race, color, religion, national origin, sexual orientation, marital status, veteran status, gender, age or disability (except when gender, age or physical ability is a bona fide occupational qualification) in all aspects of our human resources policies, programs, practices and operations. All information contained in or connected with this application is considered personal and confidential and used only in conjunction with your employment by the City of Joliet. Conditions of employment include: verification of work eligibility as required by Federal Immigration Law; passage of drug and alcohol tests; random drug/alcohol testing during employment for certain positions; driving record; residency within City of Joliet corporate limits as stated on job posting.

Selection process includes formal application; evaluation of required qualifications; testing, if applicable; oral interview; criminal background check; driving record check, if applicable; reference check; pre-employment medical and drug/alcohol screening. Anticipated duration of selection process is 90 days after the deadline date; applicants not selected will be notified by letter. Individuals may submit an application for other positions as they become available, adhering to the guidelines on the job announcement posting.

Please furnish complete information as requested in this application. You may attach additional information that describes your qualifications. **Please print in ink.**

Title of Position(s) Applying For:

Last Name	First Name	Middle Initial	Social Security Number
Street Address	City, State		Zip Code
Home/Cell Phone Number	Work Phone Number		Email Address

EDUCATION

Name/Location				
High School		Graduated? Yes No	Passed GED? Yes No	
College or Other School	Dates Attended	Graduated? Yes No	Degree Name & Date	Degree Major
		Graduated? Yes No		
		Graduated? Yes No		

FOR INTERNAL USE ONLY

Applicant's Name: _____
 Position Title: _____
 Position Vacancy Number: _____

EMPLOYMENT HISTORY

Start with current/last employer and work back, including self-employment and periods of unemployment. Please print and provide all the information requested. Attach additional sheets if necessary.

May we contact your current supervisor? Yes No Unemployed

Employer: _____ Supervisor Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Dates of Employment: _____

Job Title: _____ Ending Salary: _____

Hours per week: _____ Reason for leaving: _____

Job Duties: _____

Employer: _____ Supervisor Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Dates of Employment: _____

Job Title: _____ Ending Salary: _____

Hours per week: _____ Reason for leaving: _____

Job Duties: _____

Employer: _____ Supervisor Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Dates of Employment: _____

Job Title: _____ Ending Salary: _____

Hours per week: _____ Reason for leaving: _____

Job Duties: _____

Employer: _____ Supervisor Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Dates of Employment: _____

Job Title: _____ Ending Salary: _____

Hours per week: _____ Reason for leaving: _____

Job Duties: _____

EMPLOYMENT HISTORY (Cont.)

Employer: _____ Supervisor Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Dates of Employment: _____

Job Title: _____ Ending Salary: _____

Hours per week: _____ Reason for leaving: _____

Job Duties: _____

List any special skills acquired through work experience, licenses, or certificates related to this position.

Please indicate yes or no to the following questions and provide relevant information.

- Yes No Are you legally eligible for employment in the United States?
- Yes No Have you ever worked for the City of Joliet? If yes, provide dates and departments:

- Yes No Are you subject to recall from the City? Department name: _____
- Yes No Are you subject to recall from other employers? Employer name: _____
- Yes No If this position requires a driver's license/CDL, please indicate if valid in the State of Illinois and class of CDL: _____
- Yes No Do you have relatives working for the City? If yes, list name, department, and relationship.

- Yes No Have you ever been convicted of or pleaded guilty to a felony or a misdemeanor? If yes, provide date, location, court jurisdiction, charge, and disposition including fines and/or imprisonment. Note: Conviction of a felony/misdemeanor may not disqualify you and are reviewed in relation to job requirements.

