



CITY OF BELLEVILLE
 101 S. Illinois Street ♦ Belleville IL 62220
 APPLICATION FOR EMPLOYMENT

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classification.

Name: _____ Date: _____

Address: _____
 Street City State Zip

Telephone Number: _____ Are you over 18 years old? Yes No

Social Security Number: _____

Are you authorized to work in the U.S. on an unrestricted basis? Yes No

How did you learn of this opening? _____

Have you worked here before? Yes No

Are you aware of the essential functions of the job or have you been shown a copy of the job description listing the essential functions of the job? Yes No

Can you perform these essential functions with or without reasonable accommodation? Yes No

Are there any hours, shifts or days you cannot or will not work? _____

Shift preferred: _____ Part-Time: _____ Full-Time: _____

Are you willing to work overtime as required? Yes No

Have you been convicted of a felony within the past 7 years? Yes No (Conviction will not necessarily disqualify an applicant for employment.) If yes, describe conditions. _____

EDUCATION	NAME & LOCATION OF SCHOOL	YEAR GRADUATED	MAJOR	DIPLOMA/DEGREE
High School				
College/University				
College/University				
Other Training Education				

In addition to your work history (reverse side), what other experiences, skills or qualifications would especially fit you for work with our company

POSITION APPLIED FOR: 1.

Wage or salary desired? \$ _____ When can you start? _____

WORK HISTORY

May we contact your present employer? Yes No

Most Recent Employer:	Description of Duties:
Address:	
City/State/Zip	
Supervisor Name/Title/Telephone Number	Date Started/ Starting Salary Date Left/ Salary on leaving
Reason for leaving	
Previous Employer:	Description of Duties:
Address:	
City/State/Zip	
Supervisor Name/Title/Telephone Number	
Reason for leaving	
Previous Employer:	Description of Duties:
Address:	
City/State/Zip	
Supervisor Name/Title/Telephone Number	
Reason for leaving	
Previous Employer:	Description of Duties
Address:	
City/State/Zip	
Supervisor Name/Title/Telephone Number	
Reason for leaving	

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I Authorize the City of Belleville to make an investigation of any of the facts set forth in this application.

I understand that employment with the City of Belleville is "At Will", which means that either I or the City can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis.

Date: _____ Applicant's Signature: _____

EMPLOYMENT DATA RECORD

Employees and applicants are treated without regard to race, color, religion, sex, national origin, age marital or veteran status, medical condition or handicap, or any other legally protected status.

As an employer with an Affirmative Action Program, we comply with the government regulations, including Affirmative Action responsibilities where they apply.

The purpose for the Data Record is to comply with the government recordkeeping, reporting and other legal requirements. Periodic reports are made to the government on the following information. The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Data Records are kept in a Confidential File and are not a part of your Application of Employment or personnel files.

PLEASE NOTE: Your cooperation is voluntary. Inclusion or exclusion of any data will not affect any employment decision.

VOLUNTARY SURVEY

Date: _____

Government agencies at times require periodic reports on the sex, ethnicity, handicap, veteran, and other protected status of applicants and employees. This data is for statistical analysis with respect to the success of the Affirmative Action program. SUBMISSION OF THIS INFORMATION IS VOLUNTARY.

CHECK ONE:

- Female Male

CHECK ONE OF THE FOLLOWING: (Ethnic Origin)

- White American Indian/Alaskan Native Black
 Hispanic Asian/Pacific Islander Other

CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE:

- Vietnam Era Veteran Disabled Veteran Handicapped Individual

HOW DID YOU HEAR OF THIS OPPORTUNITY:

- St. Louis Post Dispatch Belleville News Democrat St. Louis American
 E. St. Louis Monitor Radio Employment Agency
 Friend Relative Walk-In
 City Website Other _____