CITY OF TRENTON, ILLINOIS APPLICATION FOR EMPLOYMENT

EQUAL OPPORTUNITY EMPLOYER

DATE:

		PERS	ONAL INFORM	ATION					
			SOCI	SOCIAL SECURITY NO. (voluntary)					
PRESENT ADDRESS			CITY		STA	TE	ZIP CODE		
PERMANENT ADDRESS		ESS	CITY		STA	TE	ZIP CODE		
HOME PHONE		CELL PHONE	ELL PHONE HOW D		DID YOU HEAR ABOUT THIS POSITION?				
		EMD		DED					
POSITION		EMPLOYMENT DESIRED DATE AVAILABLE TO START SALARY DESIRE					ARY DESIRED		
		IF SO, MAY WE CONTACT YOUR CURRENT EMPLOYER?							
EMPLOYED? YES NO HAVE YOU APPLIED TO WORK FOR THE CITY OF TRENTON BEFORE? YES NO		I	IF "YES" WHEN?			FOR WHAT POSITION?			
		ED	UCATION HISTO						
					ARS	DID YOU	AREAS		
GRAMMAR/ELEMENTARY			AME & LOCATION OF SCHOOL			GRADUATE	STUDIED		
SCHOOL HIGH SCHOOL									
	eitv								
COLLEGE/UNIVER									
OTHER (SPECIFY)	OL/								
		GEN	ERAL INFORMA	TION					
LIST ANY SPECIALIZED TRAINING, APPRENTICESHIPS, SKILLS, LICENSES AND/OR CERTIFICATIONS									
US MILITARY VETERAN?		BRANC	BRANCH DATI		TES OF SERVICE		RANK AT SEPARATION		
DO YOU HAVE THE		HT TO ACCEPT E		NTHE US?					
HAVE YOU BEEN O	CONVICTED C	OF A CRIME IN TH	IE PAST TEN (1	0) YEARS?		*			
*IF YES, PLEASE PROVIDE ALL DETAILS INCLUDING DATE/COURT (ATTACH SEPARATE PAGES IF NEEDED)									
		EMP	LOYMENT HIST	ORY					
Please provide complete and accurate employment record beginning with present or last job. (attach additional sheets of paper if necessary). Include any job-related military service assignments and volunteer activities.									
		E & ADDRESS	SALARY	POS	ITION	REASON	I FOR LEAVING		
FROM									
TO FROM									
ТО									
FROM TO									
FROM									
ТО									

14 WEST BROADWAY • TRENTON, ILLINOIS 62293 • 618/224-7323(V) • 618/224-9136(FAX) • www.trenton-il.com

REFERENCES									
List three (3) individuals who may be contacted concerning your work history and background. Do not include									
relatives, or individuals whom you have known for less than one year.									
NAME	ADDRESS	TELEPHONE	YEARS KNOWN						
APPLICANT CERTIFICATION/AUTHORIZATION									
I certify that answers given herein are true and complete.									
Lunderstand that any false information, omission or missionresentation of facts called for in this application may									

I understand that any false information, omission or misrepresentation of facts called for in this application may result in rejection of my application or discharge at any time during my employment.

I authorize investigation of all statements contained herein and the references and employers listed above to give the City of Trenton any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the City of Trenton from any and all liability for any damage that may result from utilization of such information.

I understand that the use of illegal drugs is prohibited during employment.

I am willing to submit to testing to detect the use of illegal drugs and alcohol during employment.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand and agree that if hired, my employment is for no definite period and can be terminated at any time, with or without notice, with or without cause by either party.

In the event that I am employed, I understand that regardless of the job I am first assigned, I may be required to accept a change of job, depending on my demonstrated skills after employment and/or the needs of the City.

I understand that I am required to abide by all rules and regulations of the City of Trenton.

APPLICANT NAME (PRINT)	APPLICANT SIGNATURE	DATE					

Completed applications may be delivered in person to Trenton City Hall, faxed to 618/224-9136 or submitted electronically to <u>employment@trenton-il.com</u>. (If submitting electronically, applicants should type their full name in the 'APPLICANT SIGNATURE' field.)