



Application for Employment

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

Position Applying For: _____ Date: _____

How did you learn about us?

- Advertisement Relative Inquiry
 Employment Agency Friend Other _____

Last Name First Name Middle Name

Address City State Zip Code

Telephone Number(s)

Have you ever filed an application with us before? Yes No

If yes, date _____

Have you ever worked for us before? Yes No

If yes, dates of employment _____

Do any of your friends or relative work for Tazewell-Woodford Head Start? Yes No

If yes, please name: _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration will be required upon employment

Are you available to work? Full-Time Part-Time Temporary

Do you have reliable transportation to travel locally if the position requires it? Yes No

Education

	School and Address	Course of Study	Number of Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate College				
Other (Specify)				

Please describe any specialized training, apprenticeship, skills and extra-curricular activities.

Please describe any job-related training you have received that would prepare you for your employment.

Employment Experience

Please start with your most present or last place of employment. Include any job-related military service and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disability or other protected status.

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Employer	Dates Employed		Work Duties:
	From	To	
Address			
Telephone Number			
Supervisor			
Reason for Leaving			

2

Employer	Dates Employed		Work Duties:
	From	To	
Address			
Telephone Number			
Supervisor			
Reason for Leaving			

3

Employer	Dates Employed		Work Duties:
	From	To	
Address			
Telephone Number			
Supervisor			
Reason for Leaving			

Please continue on a separate piece of paper if employment documented above does not include the last 10 years.

Please describe any professional, trade, business or civic activities and offices held.
You may exclude memberships that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Please summarize any special job-related skills and qualifications acquired from employment or other experience.

NOTE: As a DCFS Licensed Facility, Tazewell-Woodford Head Start conducts criminal background investigations for all applicants. A conviction of a misdemeanor or felony will not automatically disqualify a job applicant; however, per the Illinois Administrative Code Part 89, Chapter 4, and DCFS Rule 385, there are criminal convictions that bar employment in a child care facility. To further discuss this matter, please contact the Human Resources Representative, or speak directly with the Supervisor during your employment interview.

Additionally, all employees of Tazewell-Woodford Head Start are Mandated Reporters as defined by Section 300, Appendix A of the Licensing Standards. Mandated reporters are required to report incidents of Child Abuse and Neglect to the DCFS Hotline—1-800-ABUSE.

Please state any additional information you feel may be helpful to us in considering your application.

References

Please list three individuals who can provide information on your professional training and job skills. Please do not list immediate family members, relatives or friends.

1. Name	Address	Phone Number
2. Name	Address	Phone Number
3. Name	Address	Phone Number

Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

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 hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Applicant's Signature _____ Date _____