



# CITY OF HILLSBORO

## Application for Employment

447 South Main Street  
Hillsboro, IL. 62049  
(217) 532-5566 FAX (217) 532-5567

County Seat  
Montgomery County

Established 1823

Committed to Diversity  
in the Workplace

Position Applied For: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Phone Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Note: All prospective employees must submit proof of identity and eligibility for employment in the U.S. prior to appointment. A social security card and drivers license is preferred.

Are you legally eligible to work in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_  
If you are not a U.S. citizen, are there any restrictions on your eligibility for employment?

If employed and under 18, can you furnish a work permit? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever worked for The City of Hillsboro? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_ Which Department? \_\_\_\_\_

**EDUCATION:** Circle the highest grade you completed. 1 2 3 4 5 6 7 8 9 10 11 12

Name and location of the last high school attended:

Did you graduate? Yes \_\_\_\_\_ No \_\_\_\_\_ If not, have you passed a G.E.D. test? Yes \_\_\_\_\_ No \_\_\_\_\_

Circle the number of years of post high school education completed. 1 2 3 4 5 6 7 8

School name And location	Date Graduated	Degree	Major Area of study
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Special Qualifications and Skills: (typing, short hand, foreign languages, professional licenses and certificates, etc.)

Do you have a driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_ Commercial Driver's License Yes \_\_\_\_\_ No \_\_\_\_\_  
List the types of vehicles you can operate and amount of experience with each. (for driving positions only)

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Have you ever been convicted of any offense against the law?

Omit juvenile offenses and minor traffic violations. Include convictions by general court martial while in the military service.

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give date, place, charge, court and fine or sentence

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A conviction does not automatically mean that you cannot be employed. What you were convicted of and how long ago are important. Give all the facts so that a decision can be made.

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Have you ever been fired or asked to resign from a job? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give the name and address of employer and describe reason.

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A firing or forces resignation does not automatically exclude you from employment. The circumstances, time elapsed and recent employment record will be considered.

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Complete for Police and Fire Positions: Birth Date \_\_\_\_\_ U.S. Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_

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**EXPERIENCE:** The selection process for most positions involves an evaluation of relevant education and experience. It is important, therefore, that you provide enough details so that your qualifications can be properly evaluated. Start with your present job and work back. Include military service and volunteer experience. Additional experience should be listed by attaching separate sheets of paper or a personal resume. Be sure to include all requested information.

Employer: \_\_\_\_\_ Dates: From \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Describe your Work: \_\_\_\_\_

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Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

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Describe your Work: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Describe your Work: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

On what date would you be available for Work? \_\_\_\_\_

Have you ever served in the military? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, branch: \_\_\_\_\_ Date entered: \_\_\_\_\_ Date discharged: \_\_\_\_\_

May we conduct a background check of your qualifications, character and record of employment?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain.

**CERTIFICATION:**  
This statement must be signed.

I certify that all of the statements made in this application are true and complete to the best of my knowledge. I understand that a false or incomplete that a false or incomplete answer may be grounds for not employing me, or for dismissing me after I have begun work. I waive all rights I might have against a previous employer who provides references and/or records concerning my employment history. I understand that for certain positions I may be required to successfully complete a physical examination and/or alcohol and drug test. I understand that my driving record may be checked as well as my fingerprints and police record if I am employed in a sensitive job.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date