



COUNTY OF KANE

APPLICATION FOR EMPLOYMENT

We appreciate your interest in our organization. Your help in providing us with a clear understanding of your background, education, work experience and skills will better enable us to determine whether you are a qualified candidate for the position for which you are applying.

Do not list "refer to resume" on this application. Please complete this form fully and accurately. If you are unable to recall specifically any item of information requested, indicate as such. All information you provide is subject to verification.

Kane County is an equal opportunity employer and adheres to the principles and practices outlined in applicable federal, state and local laws and regulations that prohibit discrimination in employment and hiring. It is the policy and practice of the County to recruit, select, hire, train, promote, demote, terminate, compensate and administer all employment practices without regard to race, color, ancestry, national origin, religion, age, sex, sexual orientation, marital status, veteran status, medical condition, pregnancy, or physical or mental disabilities unrelated to the ability to perform essential job functions with or without reasonable accommodations (except where a bona fide occupational qualification exists).

This application form is used by various Kane County departments, elected and appointed officials' offices. Kane County is considered the employer only of those personnel within its departments. Elected and appointed officials are the sole employers of their personnel; Kane County is neither the employer nor the joint employer of such personnel.

Furthermore, the County is committed to complying with the Americans with Disabilities Act. If an applicant requests a reasonable accommodation for purposes of completing the job application process, the County reserves the right to require professional documentation to confirm the need for accommodation.

KANE COUNTY
Government and Elected and Appointed
Officials' Offices



APPLICATION FOR EMPLOYMENT

Submit to:
Kane County Human Resources
719 S. Batavia Avenue,
Geneva, Illinois 60134

This application form is used by various Kane County departments, elected, and appointed officials' offices. Kane County is considered the employer only of those personnel within its departments. Elected and appointed officials are the sole employers of their personnel; Kane County is neither the employer nor the joint employer of such personnel. Any applicant in need of a reasonable accommodation to participate in the application process due to pregnancy and/or a disability is encouraged to contact the Human Resources Department.

Personal Information

Name: _____
Last First Middle

Address: _____
Street Apt. City State Zip

Primary Phone: _____ Alternate Phone: _____

Email address: _____

POSITIONS APPLIED FOR AND START AVAILABILITY

| | |
|--|--|
| Job Title | |
| Job Title | |
| Job Title | |
| Preferred Status: Full-Time <input type="radio"/> Part-Time <input type="radio"/> Temporary <input type="radio"/> Seasonal <input type="radio"/> Intern <input type="radio"/> Desired Starting Salary: \$_____ | |
| Working schedule you will accept: <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Nights <input type="checkbox"/> Weekends <input type="checkbox"/> Holidays | |
| How did you learn about this job opening: Internet <input type="radio"/> Referred <input type="radio"/> Job Fair <input type="radio"/> County Website <input type="radio"/> Other <input type="radio"/> | |
| Do you have any relatives who are currently employed in the department for which you are applying? <input type="radio"/> Yes <input type="radio"/> No | |
| If yes, please list relatives name/Department: _____ | |
| Have you ever applied here before: <input type="radio"/> Yes <input type="radio"/> No If Yes, when: Month _____ Year _____ | |
| Were you ever employed by Kane County: <input type="radio"/> Yes <input type="radio"/> No If Yes, when: From _____ To _____ (Month & Year) (Month & Year) | |
| In which Department/Division? _____ Job Title: _____ | |
| Reason for leaving: _____ | |
| If relevant to the position, please list any other languages which you can speak or read: _____ | |

SPECIAL TRAINING/EDUCATIONAL HISTORY

| Type of School | Name of School | Major | Choose Last Year Completed | Degree Earned (If yes, indicate degree) | Years Attended From To |
|---------------------------------|----------------|--------------------|----------------------------|---|------------------------|
| High School | | | | | |
| College/University | | | | | |
| Graduate | | | | | |
| Technical/Business/Trade School | | | | | |
| Other | | | | | |
| Military Service | Branch: | Length of Service: | Dates: | | |

Please list any license, registration, certificate, etc., which you have obtained, and currently hold, that is required for the job you are applying for:

If you have not obtained a required license, registration, certification, etc., please list the anticipated date of receipt: _____

Have you ever had a license, registration, certificate, etc., related to the position you are applying for suspended, revoked, placed on probation or lapsed for any reason ? Yes No If yes, please explain: _____

**Please list all current and previous employers, starting with your current employer.
If you are not presently employed, start with your most recent employer.**

EMPLOYMENT HISTORY

Company Name: _____ Phone Number: () _____

Address: _____
Street City/State Zip

Position Title: _____ Number of hours worked per week: _____

Name & Title of Immediate Supervisor: _____

Employment Dates: From ____ / ____ / ____ To ____ / ____ / ____ Beginning Salary: \$ ____ Ending Salary: \$ ____

Are you currently working for this employer? Yes No If Yes, may we contact? Yes No

If no, please specify the reason for leaving: _____

List job responsibilities in the box below:

EMPLOYMENT HISTORY

Company Name: _____ Phone Number: () _____

Address: _____
Street City/State Zip

Position Title: _____ Number of hours worked per week: _____

Name & Title of Immediate Supervisor: _____

Employment Dates: From ____ / ____ / ____ To ____ / ____ / ____ Beginning Salary: \$ ____ Ending Salary: \$ ____

Are you currently working for this employer? Yes No If Yes, may we contact? Yes No

If no, please specify the reason for leaving: _____

List job responsibilities in the box below:

EMPLOYMENT HISTORY

Company Name: _____ Phone Number: () _____

Address: _____
Street City/State Zip

Position Title: _____ Number of hours worked per week: _____

Name & Title of Immediate Supervisor: _____

Employment Dates: From ____ / ____ / ____ To ____ / ____ / ____ Beginning Salary: \$ ____ Ending Salary: \$ ____

Are you currently working for this employer? Yes No If Yes, may we contact? Yes No

If no, please specify the reason for leaving: _____

List job responsibilities in the box below:

WORK AUTHORIZATION

Are you legally authorized to work in the United States? Yes No

(Employment is subject to verification of U.S. citizenship or immigration status in accordance with the Immigration Reform & Control Act.)

If you are selected for an interview, please be prepared to complete paperwork which will authorize background checks which may include criminal and driving history as well as the status of applicable professional credentials. A conviction will not necessarily disqualify an applicant from further consideration.

PROFESSIONAL REFERENCES

Please list three references that are familiar with your work history and experience.

Name: _____ Company: _____

Business Relationship: _____ Years Known: _____

Phone: _____ Job Title: _____

Name: _____ Company: _____

Business Relationship: _____ Years Known: _____

Phone: _____ Job Title: _____

Name: _____ Company: _____

Business Relationship: _____ Years Known: _____

Phone: _____ Job Title: _____

PLEASE READ THE FOLLOWING BEFORE SIGNING

By checking this box it acts as my signature; I acknowledge that all the information contained herein is true and accurate to the best of my knowledge.

I hereby certify that all information contained in my resume and/or application is true, accurate, and complete to the best of my knowledge and belief. I agree and understand that any false statements, misrepresentations, or omissions of fact contained in this application, resume, and other employment documents or during my interview (if applicable) may cause rejection of my candidacy for employment and if employment has commenced, may be grounds for termination of employment with or without notice or benefits, regardless of how or when discovered.

I hereby authorize investigation of current and previous employment and education records and all pertinent information, personal or otherwise. I release Kane County from any and all liability that might result from conducting a background investigation. I further authorize all individuals and organizations named in this application to provide the County with all information relative to such verification and release all parties from all liability for any damage that may result from furnishing the same. I understand that Kane County reserves the right to verify criminal records information through the appropriate local, state, or federal law enforcement agencies.

I understand that Kane County is not obligated to provide employment, nor am I obligated to accept employment. Nothing in this application, or in any prior or subsequent oral or written statement, is intended to create any contract of employment. I understand that all candidates hired are subject to satisfactorily completing a probationary period. In addition, if accepted for employment, I agree to abide by the rules and policies of Kane County set forth in the employee handbook and/or any policy and procedure manual or other communications to employees. I understand that the County reserves the right to modify policies and procedures at any time, without notice.

I understand that if I am offered employment, it is contingent upon the results of my background check, as well as, receiving a medically acceptable evaluation for my post offer physical and/or passing a pre-employment drug and alcohol screening if a post offer physical or pre-employment screening is required for the position which I am applying for. I authorize the release of the final results of any background check, post offer physical, and/or pre-employment drug and alcohol screening, and the use of those results, to Kane County.

I hereby acknowledge that I have read, understand and agree with all of the above stated information.

Applicant Signature _____

Date _____

November 5, 2018 Revised