

# Village of Mansfield

## Application for Employment

### PLEASE PRINT

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

Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

### Referral Source:

Advertisement    Employee    Relative    Walk-in    School    Other

Name of Source (if applicable): \_\_\_\_\_

Name \_\_\_\_\_

Last

First

Middle

Address \_\_\_\_\_

Street

City

State

Zip Code

Telephone Number ( \_\_\_\_ ) \_\_\_\_\_

E-mail \_\_\_\_\_

The best time to call you is \_\_\_\_\_ a.m. / p.m.

If you are under 16, can you furnish a work permit?  Yes    No

Have you ever been employed here before?  Yes    No

If yes, give dates \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Are you legally eligible for employment in this country?  Yes    No

(Proof of U.S. Citizenship or immigration status will be required upon employment.)

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_

Type of employment desired:    Full Time    Part Time    Seasonal

Are you able to meet the attendance requirements of the position?  Yes    No

Have you ever been convicted of a felony?  Yes    No

Have you ever been convicted of a misdemeanor involving criminal sexual conduct, dishonesty, or violence?  Yes    No

Do you have any relatives that work for the Village of Mansfield?  Yes    No

If yes, please give their name and relation to you \_\_\_\_\_

Please return  
application to:

Village of Mansfield  
P.O. Box 10  
Mansfield, IL 61854

# EMPLOYMENT / VOLUNTEER HISTORY

Employer	Telephone ( )	Dates Employed		Summarize the work performed and job responsibilities:
		From	To	
Job Title				
Immediate Supervisor and Title		Hourly Rate/Salary		
		\$	Per	
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone ( )	Dates Employed		Summarize the work performed and job responsibilities:
		From	To	
Job Title				
Immediate Supervisor and Title		Hourly Rate/Salary		
		\$	Per	
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone ( )	Dates Employed		Summarize the work performed and job responsibilities:
		From	To	
Job Title				
Immediate Supervisor and Title		Hourly Rate/Salary		
		\$	Per	
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone ( )	Dates Employed		Summarize the work performed and job responsibilities:
		From	To	
Job Title				
Immediate Supervisor and Title		Hourly Rate/Salary		
		\$	Per	
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone ( )	Dates Employed		Summarize the work performed and job responsibilities:
		From	To	
Job Title				
Immediate Supervisor and Title		Hourly Rate/Salary		
		\$	Per	
May we contact for reference?		<input type="checkbox"/> Yes <input type="checkbox"/> No		

**Skills and Qualifications.** Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work for the Village of Mansfield.

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## EDUCATIONAL BACKGROUND / REFERENCES

School	Number Years Completed	Degree Diploma	GPA Class Rank	Major	Minor

### REFERENCES

List name and telephone number of three business or work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Telephone	Years Known

List special accomplishments, publications, awards (exclude information which would reveal sex, race, religion, national, origin, age, color, disability or other protected status.) \_\_\_\_\_

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List any additional information you would like us to consider. \_\_\_\_\_

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It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



# AFFIRMATIVE ACTION INFORMATION

(completion of information below is voluntary)

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Position(s) applied for \_\_\_\_\_

All applicants are considered with no regard to race, color, religion, sex, national origin, disability, age, veteran status or any other legally protected status.

## Referral Source

Advertisement    Employee    Relative    Walk-in    School    Other

Name of source (if applicable) \_\_\_\_\_

Applicant Name \_\_\_\_\_

Last

First

Middle

Address \_\_\_\_\_

Street

City

State

Zip Code

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

As required, we comply with government regulations including Affirmative Action obligations where they apply.

In an effort to comply with requirements regarding government recordkeeping, reporting, and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated.

Please be advised that your survey is not a part of your official application for employment. It is considered confidential information that will not be used in any hiring decision.

Gender:    Male    Female

Race/Ethnic Group:    Hispanic    Black    White    Indian/Alaskan Native  
 Asian/Pacific Islander    Other \_\_\_\_\_

## Vietnam Era or Disabled Veterans & those with Physical or Mental Handicaps or Disabilities:

Government contractor's subject to the Vietnam Era Veterans Readjustment Act of 1974 and the Rehabilitation Act of 1973, are required to take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era and qualified individuals with disabilities.

You are invited to volunteer this information, if you qualify, to assist in proper placement and determining reasonable accommodation. This information will be considered confidential, and refusal to provide this information will not adversely affect your consideration for employment.

If you wish to be identified, please check all which are applicable:

Vietnam Era Veteran    Disabled Veteran    Individual with a Disability