



VILLAGE OF BARRINGTON  
200 South Hough Street  
Barrington, IL 60010

# APPLICATION FOR EMPLOYMENT

It is the policy of the Village of Barrington to ensure equal opportunity for all individuals without regard to race, color, religion, sex, age, national origin, ancestry, marital status, military status, status as a veteran, sexual orientation, or unfavorable military discharge as those terms are defined in the Illinois Human Rights Act (775 ILCS 5/1-101, et seq..) and without regard to any other category protected by law. **Please complete all blanks or indicate "not applicable."** **Incomplete applications may be subject to rejection.**

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

Name: \_\_\_\_\_  
Last First Middle

Present address: \_\_\_\_\_  
Street City State Zip

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Position applied for: \_\_\_\_\_ Date available to start: \_\_\_\_/\_\_\_\_/\_\_\_\_

Applying for (please check one):  Full Time  Part Time  Seasonal  Temporary

Rate of pay expected: \_\_\_\_\_ per \_\_\_\_\_ Driver's license # and Class: \_\_\_\_\_

How were you referred to the Village of Barrington? \_\_\_\_\_

Are you at least 18 years of age?  Yes  No

If hired, can you prove you are legally permitted to work in the United States?  Yes  No

Military service?  Yes  No If yes, which branch \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Type of discharge \_\_\_\_\_

Were you previously employed by the Village of Barrington?  Yes  No  
If yes, what department? \_\_\_\_\_ Dates of employment: \_\_\_\_\_  
Under what name were you employed? \_\_\_\_\_

Do you have any relatives working for the Village?  Yes (please specify below)  No  
Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Have you been convicted of any violations of the law other than minor traffic violations?  Yes  No  
If yes, please explain: \_\_\_\_\_

**Conviction of a violation of the law is not an automatic bar to employment. Each case is considered on its own merit. Applicant is not required to disclose sealed or expunged records of conviction or arrest.**

# EDUCATION

Circle highest grade completed

High School

College

Post-Graduate

9 10 11 12

13 14 15 16

1 2 MA PhD

Name & location of high school; trade or business schools; or colleges attended	Dates attended From/To	Degrees/certifications earned	Courses/areas of study

# EMPLOYMENT INFORMATION

**Note:** We may contact any previous employer to verify your job title, description of past duties, dates of employment, and compensation. Is it OK if we contact your present supervisor?  Yes  No

*Work History—Start with your present or last job and work back, using additional sheets if necessary. (Resume will not substitute for completion of this portion of the application.)*

1) Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Supervisor's name \_\_\_\_\_  
 Supervisor's title \_\_\_\_\_ Phone number \_\_\_\_\_  
 Your title \_\_\_\_\_  
 Under what name were you employed? \_\_\_\_\_  
 Description of duties \_\_\_\_\_  
 \_\_\_\_\_  
 From \_\_\_\_\_ month \_\_\_\_\_ year To \_\_\_\_\_ month \_\_\_\_\_ year  
 Reason for leaving \_\_\_\_\_

2) Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 Supervisor's name \_\_\_\_\_  
 Supervisor's title \_\_\_\_\_ Phone number \_\_\_\_\_  
 Your title \_\_\_\_\_  
 Under what name were you employed? \_\_\_\_\_  
 Description of duties \_\_\_\_\_  
 \_\_\_\_\_  
 From \_\_\_\_\_ month \_\_\_\_\_ year To \_\_\_\_\_ month \_\_\_\_\_ year  
 Reason for leaving \_\_\_\_\_

3) Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Supervisor's name \_\_\_\_\_  
Supervisor's title \_\_\_\_\_ Phone number \_\_\_\_\_  
Your title \_\_\_\_\_  
Under what name were you employed? \_\_\_\_\_  
Description of duties \_\_\_\_\_  
\_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_  
          month                  year                  month                  year  
Reason for leaving \_\_\_\_\_

4) Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Supervisor's name \_\_\_\_\_  
Supervisor's title \_\_\_\_\_ Phone number \_\_\_\_\_  
Your title \_\_\_\_\_  
Under what name were you employed? \_\_\_\_\_  
Description of duties \_\_\_\_\_  
\_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_  
          month                  year                  month                  year  
Reason for leaving \_\_\_\_\_

Please use the space below to summarize any special qualifications, training or experience that you have, and feel should be considered in reviewing your application, or account for any gaps in your work history.

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

Can you perform the essential functions of the job with or without an accommodation? \_\_\_\_\_.

## REFERENCES

Name	Address	Phone #	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

# ACKNOWLEDGEMENT

*Please read carefully.*

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated.

I understand that if the Village of Barrington hires me, my employment will be at-will, meaning that either I or the Village of Barrington can terminate it at any time for any reason.

I authorize the Village of Barrington to make inquiries to my character, employment record and other matters to verify my suitability for employment and release the Village of Barrington and any individuals it contacts from any claims arising from making or responding to such inquiries. I further understand that such inquiries will include checking police records for convictions. I understand that I may request reasonable accommodations, if needed, due to disability, in order to participate in the overall application process.

This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid.

I agree to submit to a pre-employment physical and/or drug screen if required by the Village of Barrington and understand that any offer of employment is contingent upon successfully passing the test if so required.

Signed \_\_\_\_\_

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

**The Village of Barrington is an equal opportunity employer.**

Return completed form to: Village of Barrington  
Attn. Human Resources  
200 S. Hough Street  
Barrington, IL 60010