



LATERAL POLICE APPLICATION

Equal Opportunity Employer

INSTRUCTIONS FOR COMPLETING THIS EMPLOYMENT APPLICATION

We welcome you as an applicant for employment for the Village of Lemont. It is the policy and intent of the Village of Lemont to provide equal opportunity in employment to all persons. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

This policy applies to all types of full-time, part-time, temporary, and seasonal employment. All information contained in or connected with this application will be considered personal, confidential, to the extent possible, and to be used only in conjunction with your possible employment with the Village of Lemont.

Please complete the information as requested in this application. Do not submit a resume in place of completing any part of this application. If you are an individual with a disability and require assistance or accommodation in filling out this application, please contact the Human Resources Division at (630) 257-1590. You may return the completed application to: Lemont Police, 14600 127th St., Lemont, IL 60439; Fax: (630) 243-2781; Email: ChiefofPolice@lemont.il.us.

Please identify the specific positions(s) from our open job listings for which you are applying.

1. _____	2. _____
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time
<input type="checkbox"/> Temporary	<input type="checkbox"/> Summer/Seasonal
Date Available: _____	
Minimum Salary: _____ per hr. / yr.	

GENERAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

Home Phone:() Cell Phone:() Email Address: _____

Present/Permanent Address: _____ City: _____

State: _____ Zip Code: _____ County: _____

If employed, can you provide proof of authorization to work in the U.S.? Yes No

Are you related to any employee of the Village of Lemont? Yes No

If yes, state their name and relationship to you: _____

Have you ever been previously employed by the Village of Lemont? Yes No

When? _____ In what position? _____

Were you referred by a Village of Lemont employee? Yes No

If yes, please name the employee: _____

Are you at least 18 years of age? Yes No

Have you ever been terminated from employment or asked to resign by an employer? Yes No

If yes, please provide company names and details _____

Can you work any shift? Yes No Can you work overtime, including weekends? Yes No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No If no, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question.)

EDUCATIONAL INFORMATION

Type of School	Name and Mailing Address of School	Major	Circle Last Year Completed	Degree Earned (If yes, indicate degree)
High School			9 10 11 12	Yes No
College/University			9 10 11 12	Yes No
Graduate School			9 10 11 12	Yes No
Technical/ Trade School			9 10 11 12	Yes No
Other			9 10 11 12	Yes No

If you are not a high school graduate, have you passed the GED test? Yes No

List any correspondence courses, special courses, seminars, workshops, etc., that might relate to this position:

List any licenses or certificates relating to this position:

List any other skills/experience that relate to this position (Typing, Software Skills, Heavy Machinery, etc.):

List professional, trade, business or civic activities or associations to which you belong. (Please exclude memberships that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.):

EMPLOYMENT HISTORY

Please begin with your present or most recent employer and provide all the information requested. Attach additional sheet as needed. Please do not write, "see resume."

May the Village of Lemont contact your current employer? Yes No

Employer: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Dates of Employment: _____ Reason for Leaving: _____
 Your Job Title: _____ Supervisor's Name: _____
 Hours Per Week: _____ Supervisor's Email: _____
 Your Duties: _____

Employer: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Dates of Employment: _____ Reason for Leaving: _____
 Your Job Title: _____ Supervisor's Name: _____
 Hours Per Week: _____ Supervisor's Email: _____
 Your Duties: _____

Employer: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Dates of Employment: _____ Reason for Leaving: _____
 Your Job Title: _____ Supervisor's Name: _____
 Hours Per Week: _____ Supervisor's Email: _____
 Your Duties: _____

Employer: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Dates of Employment: _____ Reason for Leaving: _____
 Your Job Title: _____ Supervisor's Name: _____
 Hours Per Week: _____ Supervisor's Email: _____
 Your Duties: _____

PROFESSIONAL REFERENCES:

Please list three references that are familiar with your work history and experience. Do not list relatives, friends or personal references.

Name:	Company:
Business Relationship:	Years Known:
Phone Number:	Email Address:
Name:	Company:
Business Relationship:	Years Known:
Phone Number:	Email Address:
Name:	Company:
Business Relationship:	Years Known:
Phone Number:	Email Address:

APPLICANT AGREEMENT: RELEASE AND CERTIFICATION

Please read before signing. Questions regarding this statement should be directed to the Human Resources Manager prior to signing.

I hereby certify that all answers to the questions herein are true, accurate and complete to the best of my knowledge. I agree and understand that any false statements, misrepresentations or omissions of fact contained in this application (or any other accompanying or required documents) may cause the rejection of this application or termination of employment without notice or benefits, regardless of how or when discovered.

I understand that all candidates hired are subject to satisfactory completion of a post-offer, pre-employment physical exam, drug screen, and background check. I authorize the investigation of all statements and information contained in this application. I release the Village of Lemont from any and all liability that might result from conducting a background investigation. I also release from liability anyone supplying information pursuant to such investigation.

I understand that the Village of Lemont is an at-will employer and that this application is not, nor is it intended to be, a contract of employment. I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for the Village of Lemont to hire me. If I am hired, I understand that either the Village of Lemont or I can terminate my employment at any time and for any reason, with or without cause and without prior notice.

I acknowledge that I have read the above statements and hereby grant permission to verify the information supplied on this application for employment and employment related documents I have provided.

PRINT NAME:	
SIGNATURE:	DATE: