



# Application For Employment

City of Carterville &  
Carterville Water and Sewer Department  
103 S. Division St.  
Carterville, IL 62918

Phone (618)985-2252

Fax (618)985-9282

The City of Carterville and the Carterville Water and Sewer Department considers all applicants for employment without regard to race, color, religion, sex, national origin, age, handicap or disability, or status as a Vietnam-era or special disabled veteran in accordance with federal law. In addition, we comply with applicable state and local laws prohibiting discrimination in employment in every jurisdiction in which it maintains facilities. We also provide "reasonable accommodation" to qualified individuals with disabilities, in accordance with the Americans With Disabilities Act and applicable state and local laws.

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

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Present Address: \_\_\_\_\_

Are you over the age of 18?  Yes  No If no, state your age \_\_\_\_\_ Phone #: \_\_\_\_\_

Date you can start: \_\_\_\_\_ Salary Desired: \$ \_\_\_\_\_

Do you want to work  Full-time or  Part-time Specify days and hours if part-time: \_\_\_\_\_

Have you worked for us before?  Yes  No If Yes, When? \_\_\_\_\_

State name(s) of any friends or relatives in our employ or on our City Council or Water Board and your relationship to them:

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

Is there anything that would prevent you from performing in a reasonable and safe manner the activities of the position for which you have applied?  Yes  No

If Yes, explain:

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

Briefly describe any experience, skills, or qualifications which you feel would especially suit you for work with this municipality.

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

Are you willing to work overtime if necessary?  Yes  No

Do you have a legal right to work and remain in the United States?  Yes  No

Do you have a valid driver's license?  Yes  No If so, Driver's License # \_\_\_\_\_ State \_\_\_\_\_

If you have answered **no** to any of the above questions, please explain in detail. \_\_\_\_\_

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Do you have any driving restrictions?  Yes  No

Have you had a driving offense in connection with an accident within the last 3 years?  Yes  No

Has your driver's license been suspended or revoked within the last 3 years?  Yes  No

Have you had a drug or alcohol related driving offense within the last 5 years?  Yes  No

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses?  Yes  No

If you have answered **yes** to any of the above questions, please explain in detail including nature of offense, when, where, and disposition. \_\_\_\_\_

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**Notes:**

- ◆ A conviction record or driving offense will not necessarily be a barrier to employment. This information will be used for job related purposes and only to the extent permitted by applicable law.
- ◆ Federal laws require the employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with such laws, the Carterville City Hall and the Carterville Water and Sewer Department will verify the status of every individual offered employment with the municipality. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization upon employment.

**Educational Background**

Type of School	Name & City	Course of Study	# of Years Completed	Did you Graduate?	Diploma, Degree, Licensure or Certificate Received?

**Professional References**

Name	Address	Phone Number	Relationship

**Personal References (Do not include relatives or previous employers/supervisors)**

Name	Address	Phone Number	Relationship

**Prior Work History** List in order, **last or present employer first**. Account for any gaps in your employment. Describe in detail the work you performed. Use additional sheets of paper if necessary.

<b>Employer Name:</b>	<b>Position Held and description of duties:</b>	
<b>Address:</b>		
<b>Supervisor and Phone Number?</b>		
<b>Person in authority to verify employment: (Phone No. if different)</b>		
<b>Date Hired:</b>	<b>Date Separated:</b>	<b>Reason for leaving:</b>

<b>Employer Name:</b>	<b>Position Held and description of duties:</b>	
<b>Address:</b>		
<b>Supervisor and Phone Number?</b>		
<b>Person in authority to verify employment: (Phone No. if different)</b>		
<b>Date Hired:</b>	<b>Date Separated:</b>	<b>Reason for leaving:</b>

<b>Employer Name:</b>	<b>Position Held and description of duties:</b>	
<b>Address:</b>		
<b>Supervisor and Phone Number?</b>		
<b>Person in authority to verify employment: (Phone No. if different)</b>		
<b>Date Hired:</b>	<b>Date Separated:</b>	<b>Reason for leaving:</b>

<b>Employer Name:</b>	<b>Position Held and description of duties:</b>	
<b>Address:</b>		
<b>Supervisor and Phone Number?</b>		
<b>Person in authority to verify employment: (Phone No. if different)</b>		
<b>Date Hired:</b>	<b>Date Separated:</b>	<b>Reason for leaving:</b>

Have you ever been in the Armed Forces? Yes \_\_\_ No \_\_\_ If yes, what specialty? \_\_\_\_\_

Date entered: \_\_\_\_\_ Discharge date: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

## **Pre-employment Statement**

(Please read carefully and sign the statement below if you so agree)

I understand and agree that:

1. The information that I have provided on this application is true to the best of my knowledge, any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment or, if employed, termination from the City of Cartersville's employ.
2. In processing my application for employment, The City of Cartersville may verify all the information provided by me, or may procure or have prepared a consumer or investigative consumer report concerning my prior employment, military records, education, character, general reputation, personal characteristics, driving record, and criminal records. I understand that upon written request to The City of Cartersville, I will be informed whether an investigative consumer report was requested and given full information as to the nature and scope of this investigation.
3. I authorize and request that all of my present and former employers and those individuals I have listed as personal reference furnish information about my employment record, including a statement of reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information.
4. Any offer of employment I may receive from The City of Cartersville is contingent upon my successful completion of the City's total pre-employment screening process, including receiving references that the City considers satisfactory, and my satisfactory completion of criminal and driving background, and any medical exams that may be required after receiving a job offer and either before or after employment begins. I hereby consent to having the results of these investigations and medical exams disclosed to The City of Cartersville.
5. In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of The City of Cartersville and understand that my employment and compensation can be terminated with or without cause or notice, at any time, at the option of either the City or myself. I further understand that no manager or representative of The City of Cartersville other than the Mayor or designee, has any authority to enter into any agreement with me for employment for any specified period of time or to make any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and the Mayor or designee.

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Applicant's Signature

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Date

**AUTHORIZATION TO RELEASE INFORMATION**

To Whom It May Concern:

I hereby authorize any sworn Police officer or other authorized representative of the City of Carterville bearing this release, or a photo static copy thereof, within six (6) months of its date, to obtain information from your files pertaining to my employment, credit, financial status, credit history, or educational records, including but not limited to credit history, academics, achievements, attendance, athletics, personal (non-medical) history, employment history, financial payments and obligations, and disciplinary records. I hereby direct you to release such information upon request of the bearer.

This release is executed with full knowledge and understanding that the information is for the official use of the City of Carterville. Consent is granted for the City to furnish such information above, as third parties, in the course of fulfilling its official responsibilities.

I hereby release you as the custodian of such records, and any school, college, university, or other educational institution, credit bureau, lending institutions, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

I hereby acknowledge that information obtained by the City in the background investigation is confidential and will not be released to the applicant. I acknowledge that this is important in order to obtain objective and unbiased information. I will not attempt to obtain from the City of Carterville a copy of any background information obtained by the City of Carterville. I understand that, in connection with the routine processing of my employment an, the City of Carterville may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. Upon written request from me the City will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act. THE CITY WILL NOT ASK, AND YOU ARE NOT REQUIRED TO DISCLOSE INFORMATION ABOUT EXPUNGED JUVENILE RECORDS OF ARREST AND CONVICTION.

A copy of this authority to release will be as valid as the original. Should there be any questions as to the validity of this release, you may contact me as indicated below.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Printed Full Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_

Subscribed and sworn to by \_\_\_\_\_, before me, a Notary Public, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My commission expires: \_\_\_\_\_