



## APPLICATION FOR EMPLOYMENT

Please return to:

**CITY OF BATAVIA**  
Human Resources  
100 North Island Avenue  
Batavia, IL 60510

Received

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

By: \_\_\_\_\_

**This application is used for general City of Batavia job opportunities. This is not the correct application if applying for a Police Officer or Firefighter position.**

We welcome you as an applicant for employment with the City. Your application will be considered with others in competition for the position in which you are interested. It is the policy and intent of the City of Batavia to provide equal opportunity in employment to all persons. This policy prohibits discrimination because of race, color, religion, national origin, political affiliation, gender, sexual orientation, age, marital status, veteran status, or physical or mental disability. This policy applies to all phases of full, part-time, temporary and seasonal employment.

All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible employment by the City of Batavia. Please furnish us with complete information as outlined in this application. You are encouraged to attach any additional information, which you believe qualifies you for the position for which you are applying. Please use typewriter or ink. If you have any questions about the status of your application please call Human Resources at (630) 454-2070.

**1. Name:** \_\_\_\_\_  
(Last) (First) (Middle)

**2. Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

**E-Mail:** \_\_\_\_\_

**3. Type of work or title of job you are seeking:** \_\_\_\_\_

**4. Telephone Number:** \_\_\_\_\_  
(Days) (Evenings)

**5. Type of Employment Desired:**  Full-time  Part-time  Seasonal

**6. Times Available:**  Days  Evenings  Nights  Weekends  Holidays

**7. Presently Employed?**  Yes  No

If yes, may we contact your Employer?  Yes  No

**8. Do you possess a valid Illinois Driver's License?**

Yes  No

If applicable, do you possess a valid Illinois Commercial Driver's License?

Yes  No  
CDL Class \_\_\_\_\_

**9. Are you legally authorized to work in the United States?**

Yes  No

**10. Have you ever been convicted of a felony?**

Yes  No

If yes, please explain: (Attach if necessary)

In answering this question, you are not obligated to disclose expunged juvenile records of adjudication or arrest and/or any other sealed, annulled or expunged convictions, or convictions that were pardoned by the Governor.

A criminal conviction will not necessarily be a bar to employment; rather, such information is only relevant in determining whether the conviction is directly related to the job for which you are applying. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. Failure to honestly answer these questions will result in discontinued consideration of the application or termination of employment.

**11. Are you presently working for the City?**

Position: \_\_\_\_\_

Yes  No

**12. Have you previously worked for the City?**

Yes  No

Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

**13. Current relatives employed or elected for the City?**

Yes  No

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

**14. If hired, when will you be able to begin work?** \_\_\_\_\_

**15. Military Service:** Branch \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Duties:

**16. Education and Training:**

Please indicate the last three schools that you have attended.

School Name	Years Completed	Degree or Diploma	GPA/Class Rank	Course of Study

**17. Employment Information:**

Begin with your present employer and work back. Account for all time during the past ten years, including periods of unemployment. List any other work experience that may qualify you for this position. Attach additional pages if necessary.

<p>Employer: _____</p> <p>Address: _____</p> <p>Supervisor: _____ Name and Title</p> <p>Your Title: _____</p> <p>Your Duties: _____</p>	<p>From: _____ Mo. Year</p> <p>To: _____ Mo. Year</p> <p>Total: _____ Years Months</p> <p><input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time</p> <p>Hrs/Wk _____</p> <p>Last Salary: _____</p> <p>Reason for Leaving: _____</p>
<p>Employer: _____</p> <p>Address: _____</p> <p>Supervisor: _____ Name and Title</p> <p>Your Title: _____</p> <p>Your Duties: _____</p>	<p>From: _____ Mo. Year</p> <p>To: _____ Mo. Year</p> <p>Total: _____ Years Months</p> <p><input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time</p> <p>Hrs/Wk _____</p> <p>Last Salary: _____</p> <p>Reason for Leaving: _____</p>

Employer: _____ Address: _____ Supervisor: _____ <div style="text-align: center;">Name and Title</div> Your Title: _____ Your Duties: _____	From: _____ <div style="text-align: center;">Mo.          Year</div> To: _____ <div style="text-align: center;">Mo.          Year</div> Total: _____ <div style="text-align: center;">Years          Months</div> <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Hrs/Wk _____ Last Salary: _____ Reason for Leaving: _____
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**18. Please list any job related special qualifications, training or experience, which you have, and feel should be considered in reviewing your application:**

**19. Emergency Contact: In case of emergency, please notify:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**20. Professional References:** Please list the names of three supervisors/co-workers who you have known for at least one year:

Name	Address	City/State	Telephone

**21. Referral Source: How did you hear about this job?**

- City Web Site       Walk-In       Newspaper (please specify) \_\_\_\_\_
- Other (please specify) \_\_\_\_\_

**Please Read Carefully Before Signing:** I certify that all the statements in this application are accurate to the best of my knowledge. I understand that any false statements on this application shall be considered sufficient cause for dismissal.

I authorize the City of Batavia to investigate any of the information contained herein, including the contacting of my references. I also authorize the Batavia Police Department to disclose and/or release any information on any conviction listed on file under my name and release the Batavia Police Department from any and all liability for damages for the furnishing of any information concerning me.

If I receive a conditional offer of employment from the City, I agree to submit to a physical examination, which includes a pre-employment drug test, which I will be required to pass before being finally accepted for employment.

I further agree to comply with all the rules and regulations of the City of Batavia now in force or any that may be established.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Thank You for Applying**