



**Parks/Forestry & Recreation Department
Seasonal Application for Employment
Equal Opportunity Employer**

Important: Please fill out this application as completely and clearly as possible.

At time of appointment you may be required to submit verification of previous employment, education, military services or any other statements on this application. Any material misrepresented may be grounds for termination of employment or ineligibility. Please answer all questions fully and accurately.

It is the policy and practice of the City of Evanston to hire, train, promote, compensate, and administer all employment practices without regard to race, color, sex, sexual orientation, age, marital status, medical condition, religious affiliation, veteran status, national origin, disability unrelated to the ability to perform the essential functions of the job, or any other protected category. Furthermore, the City is committed to complying with the Americans with Disabilities Act. If you believe that you need a reasonable accommodation in order to apply for a job or complete an application for employment due to the fact that you have a disability, please notify the City within three days of your application of your specific needs for a reasonable accommodation so that the City can assist you where appropriate. If an applicant requests an accommodation for purposes of completing the job application process, the City reserves the right to require the applicant to furnish documentation from an appropriate professional (e.g., a doctor, rehabilitation counselor, etc.) confirming that the applicant has a disability or concerning their functional limitations for which a reasonable accommodation is requested. If there are any questions regarding this policy, they may be directed to the Staff of the Department of Human Resources, its Director, or the City of Evanston's Disabled Services Specialist.

Position You Are Applying For: _____

If applying for a camp position, list up to 3 camp choices: (1) _____

(2) _____ (3) _____

Date of Application: _____ Date you can start working: _____

Have you ever applied to or worked for the City of Evanston before? _____

If yes, when? _____

Are you employed now? _____

How did you happen to contact the City of Evanston? _____

PERSONAL INFORMATION

Name: _____

Last First Middle

Please list any other names you have used: _____

Last First Middle

Present Address: _____

No. Street City State Zip

Permanent Address: _____

(if different than above) No. Street City State Zip

Contact telephone number(s): _____

Email address: _____

For OFFICE Use ONLY	Staff Initials: _____
Date Received: _____ Center: Civic C-N Noyes EC F-J RC Levy Lakefront	
Date Copies Made: _____ Sent To: C-N Noyes EC F-J RC Levy Lakefront Spec. Rec Inclusion Rec Main.	

Are you legally eligible for employment in the United States? Yes No

If hired, can you present evidence of your authorization to work in the United States? Yes No

In answering the following question, do not disclose sealed or expunged records of conviction:

Have you ever been convicted of any crimes, other than minor traffic violations? Yes No

Answering yes will not necessarily preclude you from consideration. 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 answer this question honestly will result in discontinued consideration of the application or termination of employment.

If you answered yes to the preceding question, please state the nature of the crime, when and where the conviction occurred and the disposition of the matter.

Education/Training/Military Experience/Other:

	Name/Location (City, State)	No. of Years Completed	Degree/ Diploma Rank	Major/ Minor/ Completion Status
High School/GED				
College (1)				
College (2)				
Technical/Trade School				
Military Experience				
Other				

Describe any other special training or certifications (e.g., AED, CPR, lifeguard) you have received and indicate whether certifications are current:

List any additional experience/qualifications and/or skills that make you suited for the position you are applying for:

Work Experience: Begin with your present or most recent employer and provide all information requested.

Company Name: _____
Company Address: _____

Position Held: _____ Full-Time Part-Time

Supervisor's Name: _____ May we contact this supervisor? Yes No

Duties/Responsibilities: _____

Dates of Employment: Beginning: _____ Ending: _____
Salary: Starting: _____ Ending: _____

Reason for Leaving: Resignation Layoff Dismissal Other

Explanation: _____

Company Name: _____
Company Address: _____

Position Held: _____ Full-Time Part-Time

Supervisor's Name: _____ May we contact this supervisor? Yes No

Duties/Responsibilities: _____

Dates of Employment: Beginning: _____ Ending: _____
Salary: Starting: _____ Ending: _____

Reason for Leaving: Resignation Layoff Dismissal Other

Explanation: _____

Additional Information:

References:

Full Name	Years Known	Present Business or Home Address (Business Name, Street, City, State, Zip Code)	Business/Social Relationship	Telephone Number/ Email Address

Do NOT return this form electronically. Please return completed application to:

**Parks/Forestry & Recreation Department
2100 Ridge Ave., Evanston, IL 60201
Phone: (847) 866-2900**

Please review your application in its entirety. If any portion that is required to be completed has been left blank, we may be unable to process your application.

CERTIFICATION

I certify that the information contained in this application and in any supplemental materials submitted in conjunction with this application is true and complete to the best of my knowledge and understand that any false statement, material misrepresentation, or omission of material fact made in this application or supplemental material submitted in conjunction with this application is grounds for disqualification from further consideration or dismissal from employment with the City of Evanston.

I authorize the City of Evanston to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment. I authorize my former employers to disclose to the City of Evanston all documents and information related to my work record, without notifying me of such disclosure. In addition, I release my former employers, and all other persons, corporations, partnerships and associations, from all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I also authorize the City of Evanston to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having a legal and proper interest, and I hereby release the City of Evanston from any and all liability for providing this information.

In the event of my employment with the City of Evanston, I will comply with all rules, regulations, and policies set forth in the City's policy manual, employee handbook and other communications distributed by the City. If employed, I understand that I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

The City hires employees on an at will basis, meaning that either the employee or City may terminate the relationship at any time, with or without notice, and with or without cause. I understand that nothing in this employment application, in the City's policy statements or personnel guidelines, or in my communications with any City representative is intended to create an employment contract between the City and me. I also understand that the City has the right to modify its policies without giving me any notice of the changes. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the City of Evanston unless it is made in writing and signed by the City Manager.

By signing my name below, I hereby acknowledge that I have read and understand the above statement. The City will not consider my application for employment without my signature below.

Date _____

Applicant Signature _____

Printed Name _____