



# Orland Hills Police Department

16039 S 94th Ave, Orland Hills, IL 60487 — 708-349-4434

## APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer



We welcome you as an applicant for employment. Your application will be considered with others in competition for all positions without regard to creed, sexual orientation gender-identity, pregnancy, child birth, genetic information, marital status, military status, unfavorable discharge from military service, arrest record, citizenship status, status as a beneficiary on an order of protection or any other status protected by local, state, or federal law, in accordance with all applicable legal requirements. The Village of Orland Hills is subject to and complies with The Drug Free Workplace Act of the State of Illinois, and we require pre-employment/post-offer substance abuse screening for safety or security positions and follow-up screening based on reasonable suspicion.

1. Position applied for: \_\_\_\_\_ Date of Application: \_\_\_\_\_
2. Minimum salary or hourly rate required \_\_\_\_\_ Per \_\_\_\_\_ Date Available \_\_\_\_\_
3. Check One: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Seasonal \_\_\_\_\_ Temporary \_\_\_\_\_
4. How did you learn of this opening? \_\_\_\_\_

### PERSONAL INFORMATION

5. Name (Last/First/Middle): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_
6. For purposes of checking applicant's employment records, indicate any changes in name, assumed name or nicknames used:  
\_\_\_\_\_  
\_\_\_\_\_
7. Current Address \_\_\_\_\_  
Number/Street City / State / Zip
8. Phone: Cell: \_\_\_\_\_ Home: \_\_\_\_\_
9. Do you have a valid driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_ (Driver's License #) \_\_\_\_\_
10. Are you legally eligible for employment in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_
11. If you are under 18 years old, can you provide proof you are eligible to work? Yes \_\_\_\_\_ No \_\_\_\_\_
12. Have you been convicted of a felony in the past seven (7) years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court? (Conviction will not necessarily disqualify an applicant from employment and factors such as age and time of offense, seriousness and nature of the violation and rehabilitation may be taken into account.)  
\_\_\_\_ Yes \_\_\_\_ No If "Yes", describe in full, where convicted and disposition of the case.  
\_\_\_\_\_  
\_\_\_\_\_
13. Are you willing to participate in pre-employment testing for the position applied for? Yes \_\_\_\_\_ No \_\_\_\_\_



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### EMPLOYMENT HISTORY

14. Have you ever worked for the Village of Orland Hills? Yes \_\_\_\_\_ No \_\_\_\_\_

15. Have you ever applied for a position with the Village of Orland Hills before? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If 'Yes', provide date applied for and position)

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

16. Do you have any relatives who are currently employed by the village? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If 'Yes', provide name and department)

Name of Relative: \_\_\_\_\_ Department: \_\_\_\_\_

17. Please list all of your prior or current employers, starting with most current:

Company Name: \_\_\_\_\_ Date's Employed \_\_\_\_\_

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

Supervisors Name/Phone Number: \_\_\_\_\_

Job Title and Description of work: \_\_\_\_\_

Company Name: \_\_\_\_\_ Date's Employed \_\_\_\_\_

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

Supervisors Name/Phone Number: \_\_\_\_\_

Job Title and Description of work: \_\_\_\_\_

Company Name: \_\_\_\_\_ Date's Employed \_\_\_\_\_

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

Supervisors Name/Phone Number: \_\_\_\_\_

Job Title and Description of work: \_\_\_\_\_

Company Name: \_\_\_\_\_ Date's Employed \_\_\_\_\_

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

Supervisors Name/Phone Number: \_\_\_\_\_

Job Title and Description of work: \_\_\_\_\_

Please indicate below if there is an employer you wish us not to contact? Why? \_\_\_\_\_



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18. Military Service: Did you serve in the Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If 'yes', please indicate branch and if you are still serving. Also provide your rank and if there was a dishonorable discharge.)

\_\_\_\_\_

19. Education, Training, and Experience:

High School: \_\_\_\_\_

Graduate? Yes \_\_\_\_\_ No \_\_\_\_\_ GED \_\_\_\_\_

College: \_\_\_\_\_ Degree ( Type / Subject ) \_\_\_\_\_

College: \_\_\_\_\_ Degree ( Type / Subject ) \_\_\_\_\_

Vocational/Business: \_\_\_\_\_ Degree ( Type / Field ) \_\_\_\_\_

**Other Training:**

Training Attended: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

20. List your participation in any correspondence courses, seminar, workshops, training sessions, etc., that might relate to this position. Exclude those activities which indicate any legally protected status.

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

## SPECIAL SKILLS AND QUALIFICATIONS

21. Summarize any special job-related skills and qualifications acquired from employment and experience. Exclude those activities which indicate any legally protected status.

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

22. Professional License/Certification (i.e., teacher, nurse, physician, etc.) \_\_\_\_\_

Issuing State: \_\_\_\_\_ License/Certification # \_\_\_\_\_

**Use this space for additional information which you believe qualifies you for the position for which you are applying. Precede each answer with the number of the referenced question.**

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





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### REFERENCES

Name: \_\_\_\_\_ Number of Years Known \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Occupation: \_\_\_\_\_

Relation To You (Prior Boss, Family Friend, Neighbor, etc.): \_\_\_\_\_

Name: \_\_\_\_\_ Number of Years Known \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Occupation: \_\_\_\_\_

Relation To You (Prior Boss, Family Friend, Neighbor, etc.): \_\_\_\_\_

Name: \_\_\_\_\_ Number of Years Known \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Occupation: \_\_\_\_\_

Relation To You (Prior Boss, Family Friend, Neighbor, etc.): \_\_\_\_\_

### APPLICANT'S STATEMENT

#### *I understand and agree that:*

I hereby certify that I have not knowingly withheld any information that might adversely affect my application for employment and that the answers given by me are true, correct and complete to the best of my knowledge. I further certify that I, the undersigned applicant have personally completed this application. I understand that any omission, misstatement or falsification of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge in consideration of my employment. I agree to conform to all rules, regulations and policies which the Village of Orland Hills may periodically promulgate, withdraw or modify.

I hereby authorize the Village of Orland Hills, now or subsequently, to obtain, prepare, use and furnish information concerning my references, work record, education and other matters related to my suitability for employment and, further, authorize my former employers to disclose to the Village any and all letters, reports and other information related to my work record, without giving me prior notice of such disclosure. In addition, I hereby release the Village, my former employees, and all other persons, corporations, partnership and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigations or disclosure.

I understand and agree that I may be required to take a physical examination (after an offer of employment) at the Village of Orland Hills' expense, as a condition of employment. I authorize any physician or any hospital to release any information which may be necessary to determine my ability to perform the essential functions of a job for which I am being considered for employment with the Village of Orland Hills.

I understand that nothing communicated during the employment process contained in the application or conveyed during any interview which may be granted is intended to create an employment contract between me and the Village. I further understand that acceptance of employment does not create a contractual obligation upon the Village to continue to employ me in the future.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "AT WILL" nature, which means that the employee may resign at any time and the employer may discharge employee(s) at any time with or without cause. It is further understood that the "AT WILL" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Village Manager.

My signature below confirms that I have read and understand the above statements.

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