

CITY OF LEXINGTON
329 W. Main
Lexington, IL 61753

APPLICATION FOR EMPLOYMENT
(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

Date _____

Name _____ Social Security Number _____

 LAST FIRST MIDDLE

Present Address _____

 STREET CITY STATE ZIP

Permanent Address _____

 STREET CITY STATE ZIP

Phone No. _____ Are you 18 years or older? Yes () No ()

Are you either a U.S. Citizen or an alien authorized to work in the United States? Yes () No ()

SPECIAL QUESTIONS

DO NOT ANSWER ANY OF THE QUESTIONS IN THIS FRAMED AREA UNLESS THE EMPLOYER HAS CHECKED A BOX PRECEDING A QUESTION, THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION, OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

- () Height _____ feet _____ inches
- () Weight _____ lbs.
- () What Foreign Languages do you speak fluently? _____ Read _____ Write _____
- () Are you a U.S. Citizen? Yes ____ No ____
- () Date of Birth * _____
- () Have you been convicted of a felony or misdemeanor within the last 5 years? ** Yes ____ No ____

Describe: _____

() I understand and agree that I may be required to take one or more: () physical examination () lie detector test(s), as a condition of hiring or continued employment. I agree to consent to take such test(s) at such time as designated by the City and to release the City of Lexington, its directors, officers, agents or employees from any claim arising in connection with the use of such test(s). Yes ____ No ____

() I have been advised that lie detector tests, as a condition of hiring or continued employment, are prohibited by law.
Yes ____ No ____

*The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

** You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applies.

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Salary Desired _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

Ever applied to this municipality before? _____ When? _____

EDUCATION	NAME AND LOCATION OF SCHOOL	*NO. OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED
Grammar School				
High School				
College				
Trade, Business or Correspondence School				

*The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

GENERAL

Subject of special study on research work _____

U.S. Military or Naval Service _____ Rank _____ Present Membership in National Guard or Reserves _____

FORMER EMPLOYERS (List below last three employers, starting with last one first).

Date Month and Year	Name and Address of Employer	Salary	Position	Reason for Leaving
FROM TO				
FROM TO				
FROM TO				

REFERENCES: Give the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted
1.			
2.			
3.			

PHYSICAL RECORD:

Do you have any physical limitations that preclude you from performing any work for which you are being considered? Yes () No ()

If yes, what can be done to accommodate your limitation? _____

Please describe: _____

In case of
Emergency notify _____
NAME ADDRESS PHONE NO.

"I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statement on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice."

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

Hired: () Yes () No Position _____ Dept. _____

Salary/Wage _____ Date reporting to work _____

Approved 1. _____ 2. _____ 3. _____