



Bringing People and Nature Together

## Application for Employment

### Forest Preserve District of Will County

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

Position Applying for: \_\_\_\_\_

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

**Telephone: 815.727.8700**  
**Fax: 815.722.3608**

**17540 W. Laraway Road**  
**Joliet, IL 60433**

The Forest Preserve District of Will County does not discriminate against individuals on the basis of race, color, gender, national origin, age or disability. In offering employment opportunities to the public, the Forest Preserve District will make reasonable modifications to ensure that all people have an equal opportunity. To request this document in large print, audio or Braille, contact the Director of Marketing and Communications, Sugar Creek Administration Center, 17540 W. Laraway Road, Joliet, IL 60433; [comments@fpdwc.org](mailto:comments@fpdwc.org); 815.722.9383 (voice); 800.526.0844 (TDD). Requests should be made at least 48 hours in advance. While the Forest Preserve District of Will County will make every effort to meet requests in a timely fashion, some requests may take longer than others to fulfill. Persons believing that they have been discriminated against by the Forest Preserve District of Will County may file a complaint alleging discrimination with the Forest Preserve District or the Office of Civil Rights, U.S. Department of the Interior, [www.doi.gov/diversity](http://www.doi.gov/diversity).

# Application for Employment

## Personal Information

Full Name (Last, First, Middle Initial)

Street Address

City

State

Zip

Home Phone

Cell Phone

Email

When could you start?

Position applying for:

Are you willing to work (Check all that apply.):

☐ Full Time ☐ Part Time ☐ Seasonal

☐ Temporary ☐ Weekends

If Seasonal, which seasons are you available to work?:

☐ Summer ☐ Fall

☐ Winter ☐ Spring

Which days are you available to work?: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

What hours are you available to work?:

\_\_\_ A.M. until \_\_\_ P.M.

Are you legally authorized to work in the United States?:

☐ Yes ☐ No

Can you provide proof that you are at least 18 years of age or, if younger than 18, do you have a work permit?

☐ Yes ☐ No

Have you been convicted of a felony, or released from prison in the past 7 years?

☐ Yes ☐ No

(Checking "Yes" does not automatically disqualify you from employment since the nature and date of the offense and the type of job for which you are applying will be considered.)

Do you require accommodations in order to perform the essential functions of this job? ☐ Yes ☐ No

If yes, what accommodation(s) do you require?

**Employment History (List below last three employers, starting with the most recent one first.)**

Present or Last Position	Name of Company	From Mo./Yr. To Mo./Yr.
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Street Address	City	State	Zip
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Duties	Reason for Leaving
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May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Name of Supervisor	Title and Department of Supervisor	Phone # of Supervisor
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Next Previous Position	Name of Company	From Mo./Yr. To Mo./Yr.
------------------------	-----------------	-------------------------

Street Address	City	State	Zip
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Duties	Reason for Leaving
--------	--------------------

May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Name of Supervisor	Title and Department of Supervisor	Phone # of Supervisor
--------------------	------------------------------------	-----------------------

Next Previous Position	Name of Company	From Mo./Yr. To Mo./Yr.
------------------------	-----------------	-------------------------

Street Address	City	State	Zip
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Duties	Reason for Leaving
--------	--------------------

May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Name of Supervisor	Title and Department of Supervisor	Phone # of Supervisor
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**Education Information**

High School or GED	Address	City	State
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Date of Graduation	Subjects Studied
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College	Address	City	State
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Degree	Major	Grade Point Average
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College	Address	City	State
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Degree	Major	Grade Point Average
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Graduate School	Address	City	State
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Degree	Major	Grade Point Average
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Other	Address	City	State
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Degree	Major	Grade Point Average
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Additional Space (if needed):

**General**

In what computer software programs are you proficient? (Name the software.)

**Please read the following statements carefully:**

- I understand that in accepting this application, the Forest Preserve District of Will County is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that my employment is for no definite period of time and that I am employed at will and that my employment can be terminated at any time.
- I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected or, if I am hired, in my employment being terminated.
- I authorize any person, school, current employer (except as previously noted), past employer(s), and organizations named in this application form (and accompanying resume, if any) to provide the Forest Preserve with relevant information and opinion that may be useful to the Forest Preserve in making a hiring decision, and I release such persons and organizations from any legal liability in making such statements.
- I understand that if my employment is terminated by the Forest Preserve for dishonest, breach of trust or any criminal acts, the authorities may be notified, and I may be criminally prosecuted. I also understand that, if hired, I may not hold other employment, nor engage in sales, investments or other activities that create a conflict of interest with the Forest Preserve.
- I also understand that any offer of employment is conditioned on the completion of the pre-employment test and documentation. I understand that my signature below authorizes a background check and driver's abstract. I will, upon request, sign all necessary consent forms.

Date

Signature