

It is the policy of the DuPage Water Commission to provide equal employment opportunities to all employees and applicants for employment and to abide by all applicable federal, state, and local equal employment opportunity laws. All employment decisions, including, but not limited to, recruitment, hiring, placement, training, promotion, and compensation, for all job classifications will be made without regard to race, color, religion, sex, national origin, ancestry, age, marital status, sexual orientation, citizenship status, veteran status, disability or handicap, or any other legally protected category, except as required or allowed by job necessity, preemptive statutes or other laws.

(PLEASE PRINT IN YOUR OWN HANDWRITING, IN INK. DISABLED APPLICANTS MAY REQUEST ACCOMMODATION, IF NECESSARY.) Date of Application Position(s) Applied For \_\_\_\_\_ ☐ Advertisement ☐ Friend ☐ Relative ☐ Walk-In Referral Source: Employment Agency Other \_\_\_\_\_ Name \_\_\_\_ Address \_\_\_\_\_ STREET STATE CITY ZIP CODE Telephone: (\_\_\_\_) If employed and you are under 18, ☐ Yes □No can you furnish a work permit? If Yes, give date \_\_\_\_ Have you filed an application here before? ☐ Yes ☐ No Have you ever been employed here before? Yes □No If Yes, give date \_\_\_\_\_ May we contact your present employer? ☐ Yes ☐ No Are you employed now? ☐Yes □No If yes, state details, including the name and address of each such employer and the reasons given for the discharge or requested resignation:

Are you a United States citizen or do employed in the United States? (Proof of legal authorization to work in the U.S. will	,	to be	□ No
On what date would you be available	for work?		
Are you available to work	☐ Full Time ☐ Part	-Time ☐ Shift Wo	ork 🗌 Temporary
Can you travel overnight if a job requires it?	☐ Yes ☐ No		
Have you been convicted of, or plead (A conviction or guilty plea will not necessarily disquithe number of violations, the length of time that has seriousness and nature of the violation(s), the circular will be considered.)	ualify you from employment. Fac elapsed since the conviction(s)/p	lea(s), the	☐ Yes
Note: Do not include criminal history record informing impounded under the Illinois Crime Identification Advanced in the Illinois Crime Identification Advanced in the Identification Adva		or	
If yes, provide details, including the n case, including any prison term or oth		of the crime(s), and	the disposition of the
If the position for which you are apply drivers' license?	ing requires operation o ☐ No	f a motor vehicle, do	you have a valid
List professional, trade, business or crelevant to the position for which you religion, sex, national origin, sexual o	are applying (You may e	exclude those which	indicate race, color,
Give name, address and telephone n previous employers.	umber of three reference	es who are not relate	ed to you and are not

## **Employment/Military Experience**

List all employment, including military service, beginning with your current or last position. Please account for all time, even if you are providing a resume.

Employer	Telephone	Dates E	mployed	)A/   D (		
	( )	From	То	Work Performed		
Address						
Job Title						
Supervisor						
Reason for Leaving			_			
Employer	Telephone		Employed	Work Performed		
Address	( )	From	То			
Job Title						
Supervisor						
Reason for Leaving						
Employer	Telephone	Dates E	Emp <b>l</b> oyed	Work Performed		
	( )	From	То	vvork Performed		
Address						
Job Title						
Supervisor						
Reason for Leaving						
Employer	Telephone		Employed	Work Performed		
Address	( )	From	То	vvoint i circimica		
Job Title						
Supervisor						
Reason for Leaving						
	space, please contin					

Special Skills and Qualifications
Summarize the special skills and qualifications that are relevant to the position for which you are applying that you acquired from your previous employment or other life experiences.

## **Education**

	Elementary			High School				College/University			Graduate/ Professional						
School Name																	
Years Completed: (Circle) Diploma/Degree	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Describe Course Of Study:																	
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities that are relevant to the position for which you are applying.																	
Honors Received:																	
State any additional in	ıform	natio	on yo	ou fe	el m	nay b	e help	oful to	o us ii	n con	sider	ing yo	our app	licat	ion.		
Have any of your form name other than the oname, or nickname)?	ne li	isted	d at t	the k	egir	าทiทg	of th	is ap	plicati	ion (f	or ex						er a

## **Applicant's Statement**

I certify that all of the information in this application and any other application materials (and accompanying resume, if any) is true, complete and correct to the best of my knowledge. I understand and agree that any incorrect statement, falsification, material misrepresentation, or omission of any information in connection with this application, resume, and/or other application materials, whenever or

however discovered, may disqualify me from further consideration for employment or, if I am hired, may result in disciplinary action, including immediate dismissal from employment.

I authorize a thorough investigation of me, my past employment, background, criminal history, education and activities. I understand that this investigation may include a fingerprint check. I agree to cooperate in such an investigation, and release and discharge from all liability, responsibilities, claims or damages of any kind or nature all persons or entities requesting or supplying information pursuant to such investigation, including the Commission, any reference from whom information is obtained, and any third party which provides information used for employment purposes. If I am hired, I further authorize the Commission to supply my employment record, in whole or in part, without prior notice, to any prospective employer, government agency, or other party with a legal or proper interest.

I understand that, if I am given an offer of employment, my employment will be conditioned upon me taking and passing a medical and physical examination, which will include a drug and alcohol test. I also understand that if I am hired, during the course of my employment, I may be subject to drug or alcohol testing. I agree to submit to any such lawful test. I understand that my refusal to submit to such lawful test and/or receipt of a positive test result may disqualify me from further consideration for employment or, if I am hired, may result in disciplinary action, including immediate dismissal from employment. Furthermore, I understand that my signature below serves as my consent to a drug or alcohol test and authorizes the release of the results of said test to the DuPage Water Commission for appropriate review.

I understand and agree that, if I am hired, my employment will be on an at-will basis, which means that either I or the Commission can terminate the employment relationship at any time, for any reason, with or without cause, and with or without notice. I further understand that, if I am hired, I will not be employed for any specified time, and that this application is not, and is not intended to be, a contract for employment or continued employment, and that no personnel recruiter, interviewer, or any other representative of the Commission other than the General Manager has any authority to enter into any agreement or contract for employment for any specified duration or period of time, and then, only in writing.

I understand that if I am hired, as a condition of employment, I must produce certain documentation to verify my identity and U.S. citizenship status or, if I am an alien, my legal authorization to work in the United States. As a consequence, I understand that any offer of employment I may receive will be contingent on my ability to produce the required documentation within the time period required by law.

If I am hired, I understand that I will be required to abide by and conform to the rules and regulations of the Commission that govern my employment. I understand that my violation of such rules and regulations may result in disciplinary action, including immediate dismissal from employment, as determined in the Commission's discretion.

I understand that under the Commission's policy, this application will remain active for only 90 days. Therefore, if I have not been hired within 90 days of the date of this application and I still wish to be considered for employment with the Commission, I understand that I will need to complete and submit a new employment application.

I certify that I have read and understand the foregoing paragraphs.	I understand	that this is	simply an
application for employment and does not imply that I will be employed	d <i>.</i>		

Date

Signature of Applicant

Arrange Interview Yes No  Employed Yes No Date of Employment  Hourly Rate/ Salary Department	For Personnel Department Use Only								
Hourly Rate/	Arrange Interview	Yes	☐ No						
	Employed 🗌 Yes	☐ No	Date of Employment						
	Job Title		Hourly Rate/ _ Salary	Department					
By	Ву		NAME AND TITLE		DATE				