

**ILLINOIS VALLEY ECONOMIC DEVELOPMENT CORPORATION
PRE-EMPLOYMENT INFORMATION FORM**

In compliance with Federal and State Equal Employment Opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or handicap.

To help us comply with Federal/State Equal Employment Opportunity record keeping, reporting and other legal requirements, please answer questions below.

This Pre-Employment Form will be kept in a Confidential File separate from the attached application for employment.

COMPLETION OF THIS PAGE IS VOLUNTARY

Date: _____

Position(s) Applied For: _____

Referred By: _____

Name _____ **Telephone:** _____
Last First Middle Area Code

Address: _____
Number Street City State Zip Code

Birthdate: _____ **Age:** _____

Race/Ethnic Group: White Black Hispanic Asian/Pacific Islander
 American Indian/Alaskan Native Other

Sex: Male Female

Marital Status: Single Married Divorced Widowed

Number of Children: _____

Are you a Veteran? Yes No Branch and Rank _____

Are you a disabled Veteran? Yes No If yes, VA disability rating: _____%

Have you ever filed a claim for Workmen's Compensation? Yes No

Illinois Valley Economic Development Corporation

Application for Employment

Answer all questions- Please print or type

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Date of Application: _____ **Position(s) Applied For:** _____

Referral Source: Advertisement Employment Agency
 Friend Relative Other _____

Social Security Number: _____

Name: _____
Last First Middle

Address: _____
Number Street City State Zip Code

Home/Cell Phone: _____ **Business Phone:** _____

If known by any other name, please indicate: _____

Have you ever filed an application or been employed here before? Yes No

Are you legally authorized to work in the United States? Yes No

Are you available to work: Full-Time Part-time

Do any of your friends or relatives work here: Yes No
If yes, list name(s): _____

Are you over the age of 18? Yes No

Have you ever been convicted of a felony or released from prison within the last 7 years? Yes No

If yes, describe in full, including date(s):

Are you on lay-off and subject to recall? Yes No

On what date would you be available to start work? _____

Do you own an automobile? Yes No

If yes, make/model/year: _____

Do you have a valid driver's license? Yes No

Can you travel if a job requires it? Yes No

Have you been bonded? Yes No

If yes, for what positions? _____

Is there any reason you could not perform the essential functions of the position for which you are applying? Yes No

If yes, please explain: _____

List trade or professional organizations of which you are a member, including offices held:

Give name, address, and phone of three references not related to you:

1) Name: _____ Telephone: _____
Address: _____

2) Name: _____ Telephone: _____
Address: _____

3) Name: _____ Telephone: _____
Address: _____

In case of an accident or emergency, please notify:

Name: _____ Telephone: _____

Address: _____

Employment Experience

List each job held, starting with your present or last job. Include military service assignments and volunteer activities.

1)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:	Hourly Rate/Salary	
Job Title:	Starting:	Final:
Supervisor:		
Work Performed:		
Reason for Leaving:		
2)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:	Hourly Rate/Salary	
Job Title:	Starting:	Final:
Supervisor:		
Work Performed:		
Reason for Leaving:		
3)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:	Hourly Rate/Salary	
Job Title:	Starting:	Final:
Supervisor:		
Work Performed:		
Reason for Leaving:		
4)		
Employer:	Dates Employed:	
Address:	From:	To:
Phone Number:	Hourly Rate/Salary	
Job Title:	Starting:	Final:
Supervisor:		
Work Performed:		
Reason for Leaving:		

Education

	High School				Vocational Training				College/ University				Graduate/ Professional			
School Name																
Years Completed/ Degree	9 <input type="checkbox"/>	10 <input type="checkbox"/>	11 <input type="checkbox"/>	12 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Diploma/Degree																
Describe Course of Study																
Describe Specialized Training, Apprenticeship, Skills and Extra-Curricular Activities																

Agreement:

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make such investigations and inquiries of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, school, or persons from all liability in responding to inquiries in connections with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the organization.

Signature of Applicant: _____ **Date:** _____

Agency Use Only

Arrange Interview: Yes No **Date:** _____ **Interviewer:** _____

Remarks: _____

Employed: Yes No **Date of Employment:** _____

Job Title: _____ **Hourly Rate/Salary:** _____