



CITY OF NEWTON

108 North Van Buren Street, Rm. A
 Newton, Illinois 62448
 www.cityofnewtonil.com
 Phone (618) 783-8451
 INCORPORATED CITY 1887

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer...all applicants are considered for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Last Name		First Name		Middle Initial		Home Phone Number:	
Street Address		City/State		Zip Code		Cell Phone Number:	
Email Address:							
If hired, can you provide evidence of legal eligibility to work in the U.S.?				Any offer of employment is conditioned upon completing form I-9 and providing the appropriate documents for identity and work authorization.			
Position Desired:		Wage/Salary Desired:		Full Time? Part Time?			
Do you currently hold a valid driver's license? Yes / No							
First and last dates available for work:			Are you 18 years of age or older?		If under 18 years of age, you will be required to submit a birth certificate or work certificate as required by state or federal law.		
Time/dates unavailable for work:							
Name of high school attended:		City & State		Graduate? Yes / No	GED? Yes / No		
Name of college or technical school:		City & State		Graduate? Yes / No	Degree? Yes / No	Major:	
Are you presently enrolled in school?		If yes, give name & address of school and expected degree date:					
List any extra-curricular activities:							
List any job-related skills or accomplishments, including military service:							

CAREFULLY READ EACH STATEMENT BEFORE SIGNING AT THE BOTTOM

I certify that all of the information provided in this employment application is true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background, credit history check, and drug test, as applicable. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employers, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I have read, understand, and agree to the above statements.

Signature:

Date: