



IN THE CIRCUIT COURT FOR THE SEVENTH JUDICIAL CIRCUIT
SANGAMON COUNTY, ILLINOIS

APPLICATION FOR EMPLOYMENT

Sangamon County is committed to the provisions of Equal Employment Opportunity and Affirmative Action to all applicants regardless of race, color, religion, ancestry, age, sex, marital or veterans' status, national origin, disability or any other legal protected status.

All statements made by the applicant for employment on this application form will be checked for accuracy. Please read carefully, answer all questions and print clearly in blue or black ink.

APPLICANT INFORMATION

Date of Application _____

How did you hear about this job? _____

Name _____
Last First Middle

Telephone () _____ Email Address _____

Address _____
Number Street City State Zip Code

Have you lived at your current address for more than five (5) years? YES NO

If no, please list your last 2 addresses:

1. _____ 2. _____

Are you a resident of Sangamon County? YES NO

If no, would you relocate to Sangamon County? YES NO

Are you 18 years of age or older? YES NO

If no, can you submit a work permit? YES NO

Do you have a legal right to work in the United States? YES NO

If no, please explain: _____

Have you ever been convicted of a felony, or within the last five years, a misdemeanor? YES NO

If yes, please explain offense, date of offense and place in which it occurred.

Are you currently taking unlawful or illegal drugs? YES NO

EDUCATION/EXPERIENCE

What was your highest grade completed? _____

Please list any college, university, trade school or other education institution attended, degrees received (if any), type of courses taken and number of years attended: _____

Please list any professional licenses or certifications you hold: _____

Please list any technical skills for which you have been trained: _____

Please provide any additional information such as special skills, training, management, or supervisory experience, equipment operation or other qualifications, including military service, you feel will be helpful to use in considering your application: _____

EMPLOYMENT INFORMATION

Position for which you are applying: _____ Full-Time Part-Time

If applying for a part-time position, what days and hours are you available to work?

Days _____ Hours _____

How soon can you report to work? _____

Have you previously been employed by the Circuit Clerk's Office? YES NO

If yes: Date Started _____ Date Ended _____ Position Held _____

Immediate Supervisor _____ Reason for Leaving _____

Are you presently employed? YES NO

If yes, why do you desire to change employment? _____

May we contact your present employer? YES NO

WORK EXPERIENCE

(List most recent employers, including volunteer experience)

Employer: _____ Dates Employed _____ to _____

Address _____ Phone () _____

Job Position/Title _____

Immediate Supervisor(s) Name and Title _____

Briefly describe your job duties _____

Reason for Leaving? _____

WORK EXPERIENCE (CONTINUED)

Employer: _____ Dates Employed _____ to _____

Address _____ Phone (____) _____

Job Position/Title _____

Immediate Supervisor(s) Name and Title _____

Briefly describe your job duties _____

Reason for Leaving? _____

Employer: _____ Dates Employed _____ to _____

Address _____ Phone (____) _____

Job Position/Title _____

Immediate Supervisor(s) Name and Title _____

Briefly describe your job duties _____

Reason for Leaving? _____

Employer: _____ Dates Employed _____ to _____

Address _____ Phone (____) _____

Job Position/Title _____

Immediate Supervisor(s) Name and Title _____

Briefly describe your job duties _____

Reason for Leaving? _____

WORK EXPERIENCE (CONTINUED)

Employer: _____ Dates Employed _____ to _____

Address _____ Phone (____) _____

Job Position/Title _____

Immediate Supervisor(s) Name and Title _____

Briefly describe your job duties _____

Reason for Leaving? _____

PERSONAL REFERENCES

Give name, address and telephone number of 3 references who are not related to you and are not previous employers.

1. Name: _____ Phone: (____) _____

Address: _____

2. Name: _____ Phone: (____) _____

Address: _____

3. Name: _____ Phone: (____) _____

Address: _____

JOB APPLICANT'S AGREEMENT AND CERTIFICATION
(PLEASE READ CAREFULLY BEFORE SIGNING)

“I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in anyway, it shall be considered sufficient cause for denial of employment, or if employed and found late, discharge”

“I understand that prior to being offered employment with the Sangamon County Circuit Clerk’s Office a background check will be done and that I am subject to drug and/or alcohol testing at any given time during employment. I authorize the use of any information in this application to verify my statements, and I authorize past employers, all references and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damage on account of having furnished such information.”

“I understand that prior to being offered employment with the Sangamon County Circuit’s Office I may be requested to take a physical examination. In the event I have a disability which will affect my ability to take the test, I will so inform the Sangamon County Circuit Clerk’s Office prior to the administration of the test so that a reasonable accommodation can be made. Requesting Accommodations may include accessible testing sites, modified testing conditions and accessible testing formats. The Sangamon County Circuit Clerk’s Office reserves the right to require medical documentation concerning the need for such accommodation.”

“I understand that this application will be kept on active file for sixty (60) days from the date completed after which time I would have to reapply in accordance with the established County policy.”

In order to conduct a background check, the Sangamon County Sheriff’s Office will need the following information. All information is kept confidential. The Sangamon County Sheriff’s Office is mandated by law to keep this information on file for three (3) years.

PLEASE PRINT

Complete Name _____ Male Female

Date of Birth _____ Race _____ Driver’s License # _____

Social Security # _____

By signing this document, I authorize the Sangamon County Circuit Clerk and the Sangamon County Sheriff’s Office to perform whatever criminal history check necessary.

Signature of Applicant

Date

Applications will not be processed unless they are signed and dated by the applicant.