

EMPLOYMENT APPLICATION

The Village of Somers is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, age, sex, religion or national origin.

APPLICANT PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE ANSWERING ANY QUESTIONS.

- 1. Please print or type all information. Answer all questions as completely as space will permit. Failure to complete application may prohibit you from proceeding in the evaluation process for this position.
- 2. Statements made in this application are subject to verification. The detection of false statements is a cause for disqualification or dismissal.
- 3. Date and sign the application on page 5.
- 4. Keep a copy of application materials for your files.

Position Applying for:	osition Applying for: Full Time Part Time					
What position are you applying for?		How did you find out about the position?				
	Personal I	nformation				
First Name:	Middle Initial:	Last Name:		Suffix	Suffix:	
Address:		City:	State	Zip:		
Daytime Phone:		Cell Phone:				
Email:						
Are you legally entitled to work in the United States? ☐ Yes ☐ No						
Are you age 18 or over? □ Yes □ No		Date of birth:				
Do you have a valid Driver's License? Yes No		License #:				
Do you possess a valid Commercial Driver's		If yes, check all that apply:				
License?			\Box B \Box C	\square D	\Box H	
A background check is a requirement for the job.		Do you have a criminal record?				
Do you consent: ☐ Yes ☐ No				☐ Yes	□ No	

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If yes, please explain:					
ii yes, piease expiam.					
Special skills and qualifications that	t may apply to the position	on: (Please i	nclude all co	mputer software	
which you can operate skillfully):					
Special skills and qualifications that	at may annly to the nositi	on• (Please i	nclude all co	mnuter software	
which you can operate skillfully):	it may apply to the positi	on. (1 lease 1	ilciude all co	inputer software	
······································					
List any memberships in profession	nal or technical association	ons:			
Current certifications, licenses, or	rogistrations as a mombo	r of a trada	or professio	n•	
Current ter timeations, needses, or	registrations as a membe	I OI a tI auc	or professio	II •	
	Education and Trai	ning			
Name and Location of High School	:				
Highest Grade or Year Completed:		Do you have a high school Diploma or GED? Yes No			
GED: Yes No					
Training Beyond High School					
(College or University	y, Business College or oth	er schools y	you have att	ended)	
Name & Location	Dates Attended	Graduated?		<u>Minor/Major</u>	
		□ Yes	□ No		
		☐ Yes	□ No		
			☐ 140		
		☐ Yes	□ No		
		_ 105			
			□ N		
		☐ Yes	□ No		

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Describe any education and training y school, correspondence courses, service relevant to the job you are applying for	e school				
	P.	eferences			
	IX	cici ciices			
Name:	Phone	Phone Number:		pation:	Years Known:
		yment History ecent job first			
Name and Location of Employer:		Type of Bus	iness:		
Your Job Title:		Full Time:		Dates Em	ployed:
		Part Time: □			
Your Duties:					
Supervisor's Name:		Supervisor'	s Phone	Number:	
May we contact now? ☐ Yes	□ No	Starting Salary:		Ending Sa	alary:
Reason(s) for leaving?					
, , , , , , , , , , , , , , , , , , ,					
Name and Land's CET 1	T	T CD *			
Name and Location of Employer:		Type of Busin	ness:		
Your Job Title:		Full Time:		Dates Em	ployed:
		Part Time:			-

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Your Duties:					
Supervisor's Name:	Supervisor's Phone Number:				
May we contact now? ☐ Yes ☐ No	Starting Salary:	Ending Salary:			
Reason(s) for leaving?					
N II & CE I	T CD .				
Name and Location of Employer:	Type of Business:				
Your Job Title:	Full Time: □ Part Time: □	Dates Employed:			
Your Duties:					
Supervisor's Name:	Supervisor's Phone Number:				
May we contact now? ☐ Yes ☐ No	Starting Salary:	Ending Salary:			
Reason(s) for leaving?					
Have you ever been convicted of any violations of law, other than minor traffic violations?					
If yes, for what have you been convicted, who	en, where and penalty i	mposed?			
Note: Convictions are not an automatic bar					
TOD TOP WHICH VALL ANNIEDD I CONVICTIONS HAT P	enartea may he cause t	ar alcenargo			

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APPLICANT'S CERTIFICATION AND AGREEMENT CAREFULLY READ THIS APPLICATION AND YOUR ANSWERS AND CERTIFICATION AND AGREEMENT BELOW BEFORE SIGNING.

I certify that answers given herein are true and complete to the best of my knowledge. I understand and agree that any misstatements or omissions of material fact herein subjects me to disqualification or dismissal.

I authorize the Village of Somers to make such investigations and inquiries of my personal employment, financial and other related matters as may be necessary at arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application. A copy of this authorization shall be effective as the original.

I authorize the Village of Somers to make such investigation of my medical history, as may be necessary only after I have received a conditional job offer by the Village of Somers.

I further understand that in the event of employment by the Village of Somers, my classification as a permanent employee depends upon my successfully performing work assigned me during a probationary period, where applicable.

I also understand that covered employees are compensated for overtime work in accordance with the Fair Labor Standards Act. Applicants should discuss overtime pay practices with the appointing authority prior to accepting employment with the Village of Somers.

SIGNATURE OF APPLICANT: DATE:

Thank you for completing this application and for your interest in employment with us. We would like to assure you that your opportunity for employment with the Village of Somers will be based on your merit and qualifications and no other consideration.

Office Use					
Interviewed by:		Date Interviewed:		·	
Notes, Comments, Recomm	rendations:				
Hire Date:		Will Report On:			
		-			
Approved by: Department Head Administrator Village Board Other					
Job Title:	Department:		Salary/Hourly Rate:		