



Vincent Alessio
Highway Commissioner

Employment Application

Please complete the entire application or indicate "not applicable" where appropriate. Incomplete applications may be subject to rejection. Any offer of employment is also contingent upon successful completion of a pre-employment drug screening test. Those applicants requiring reasonable accommodations to the application and/or interview process should notify the Road District directly. Your application will be considered without regard to sex, age, race, disability, marital status, or any other status that is protected by federal, state, and local law. All information in or connected with this application will be treated as confidential to the extent practicable.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Position: _____

Desired Employment:

<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Temporary
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Will you work overtime if required? YES NO If no please explain: _____

Do you have a current CDL Driver's License? YES NO If yes, what Class? _____

Driver's License Number: _____ Date Issued _____ Date Expired: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Skills & Qualifications

Summarize any special training, skills, licenses and /or certificates that you hold that may assist you in performing the work of the position for which you are applying:

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Have you ever been involuntarily terminated or asked to resign from a job? YES NO

Related Information

What job-related organizations (professional, trade, ect.) do you belong?

List special accomplishments, publications, awards, etc.:

Is there any other job-related information you want us to know about you?

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Disclaimer and Signature

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Thank you for applying to Joliet Township Road District.

Vincent Alessio
Highway Commissioner

Please Return To:
Joliet Township Road District
901 S. Joliet Street
Joliet, Illinois 60436
Email: admin@jolietwp-rd.com