



## Normal Parks and Recreation Department Seasonal Employment Application

100 E. Phoenix Ave.  
Normal, IL 61761  
Phone: 309.454.9540 Fax: 309.454.9701  
TTD: 309.454.9630

**POSITION APPLYING FOR:** 1<sup>st</sup> Choice: \_\_\_\_\_  
 2<sup>nd</sup> Choice: \_\_\_\_\_  
 3<sup>rd</sup> Choice: \_\_\_\_\_

Current Date: \_\_\_ - \_\_\_ - \_\_\_\_ Dates available for work: (start) \_\_\_ - \_\_ - \_\_\_\_ (end) \_\_ - \_\_ - \_\_\_\_

**Park Maintenance Employees MUST be available for uninterrupted work, including weekends with NO vacations from early May to Late August**

**INSTRUCTIONS:**

Please Print Neatly or Type.

**An Incomplete Application May Result In a Lost Employment Opportunity! WARNING: BE HONEST AND TRUTHFUL IN RESPONDING TO ALL ITEMS AND QUESTIONS!**

First Name, Middle Name, Last Name		Maiden Name
Present Address: Street, City, State, Zip Code:		Permanent Address: Street, City, State, Zip Code:
Preferred Telephone:	Home Telephone:	Cell Phone:
Email Address (print clearly):		
All information below must be completed.		
Are you age 18 or above? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, Give Date of Birth: ___ / ___ / ___		
Valid Drivers License? Yes <input type="checkbox"/> No <input type="checkbox"/> State: _____ DL Number: _____		
Expires: ___ / ___ / ___ DL Class: <b>A B C D</b> Has Drs License ever been revoked or suspended? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Are you able to provide proof of your lawful authorization to work in the U.S. for the Town of Normal? Yes <input type="checkbox"/> No <input type="checkbox"/> Proof of your legal right to work for the Town will be required if employed.		

**EQUAL OPPORTUNITY EMPLOYER**

It is the policy of the Town of Normal to provide employment, compensation, promotion and other conditions of employment without regard to race, color, religion, sex, sexual orientation, marital status, ancestry, national origin, age, disability, matriculation or political affiliation, unfavorable military status, or other legally protected status, association or expression, in accordance with law.

**Anyone needing an ADA accommodation must contact Normal Parks and Recreation in a timely manner prior to the start of the selection process.**

**Are you related to any employee of the Town of Normal?** YES  NO  If YES, state their name and relationship to you:

### EMPLOYMENT HISTORY

Provide a **full and complete list of your employment history**. Start with your current or most recent employer. *(Attach extra sheets if necessary.)*

Have you ever been discharged or terminated from employment? YES ( ) NO ( ) If Yes, EXPLAIN:

Employer Name	Supervisor's Name	Dates Employed	
		From	To
Mailing Address	Supervisor's phone number		
	Your Job Duties	Reason For Leaving	
Job title		Pay Rate:	
Employer Name	Supervisor's Name	Dates Employed	
		From	To
Mailing Address	Supervisor's Phone Number		
	Your job duties	Reason For Leaving	
Job Title		Pay Rate:	
Employer Name	Supervisor's Name	Dates Employed	
		From	To
Mailing Address	Supervisor's Phone Number		
	Your Job Duties	Reason For Leaving	
Job Title		Pay Rate:	
Employer Name	Supervisor's Name	Dates Employed	
		From	To
Mailing Address	Supervisor's Phone Number		
	Your Job Duties	Reason For Leaving	
Job Title		Pay Rate:	

## EDUCATION/TRAINING

Circle the HIGHEST Grade Completed:			
Grade School: 1 2 3 4 5 6 7 8	High School: 9 10 11 12	College: 13 14 15 16	Post Graduate: M.A. Ph. D.
<b>High School Attended</b>			
Name:		Are you a High School Graduate? If not, did you obtain a G.E.D.?	
City:	State:		
<b>College or University Attended</b>			
Name:		Major:	
City:	State:	Zip:	Degree received:
Name:		Major:	
City:	State:	Zip:	Degree received

## ADDITIONAL RELEVANT INFORMATION

Skill – Mark 1 for minimal experience, 2 for formal training and 3 for paid experience:

Word: _____	Theater: _____	Janitorial: _____	Power Tools: _____
Excel: _____	Childcare: _____	Horticulture: _____	Hand Tools: _____
Publisher: _____	Preschool: _____	Landscaping: _____	Farm Tools: _____
PowerPoint: _____	Swimming: _____	Golf Course Maint: _____	Hand Tools: _____
Data Entry: _____	Teen Programs: _____	Carpentry: _____	Heavy Equip: _____
	Food Svc/Concessions: _____	Electrical: _____	Auto Mechanics: _____
		Plumbing: _____	Structure Painting: _____

Crafts Please List: \_\_\_\_\_

Sports Please List: \_\_\_\_\_

Officiating Please List: \_\_\_\_\_

Coaching Please List: \_\_\_\_\_

Describe other skills or qualifications you feel are job-related assets:

### Pool Applicants Only

Certificate Type	Where Certificate Earned	Organization	Expiration date
1.			
2.			

**ANSWER THESE QUESTIONS:**

**1. Have you EVER been convicted of an offense against the law, either a misdemeanor or felony? Yes  No**   
**Have you EVER been placed under court supervision? Yes  No**

**NOTE 1: For both questions, OMIT traffic violations where you only paid a fine of \$75 or less.**

**NOTE 2: Applicants are not obligated to disclose sealed or expunged records of convictions or arrests, including expunged juvenile records of adjudication or arrest. The Town may not ask if an applicant has had records expunged or sealed for non-law enforcement agency employment.**

**NOTE 3: A criminal record will be considered as it relates to the job in question based on current federal and state law.**

**EXPLAIN any YES answers:**

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**PERSONAL REFERENCES**

Exclude Former Employers and Relatives

Name	Relationship to You	Day Phone Number	Email Address

**REFERENCE RELEASE OF LIABILITY**

I, \_\_\_\_\_, respectfully request that you forward to the Town of Normal, Illinois, any and all information that you have concerning me, my work record, or my reputation. This includes any information that may appear in my personnel file, criminal convection records, or other confidential files or records. This information will be used to determine my qualification and fitness for the position I am seeking with the Town of Normal.

I hereby release you and/or your employer from any liability and/or damage of whatever nature due to the furnishing of such information requested above. A copy of this release is as valid as the original signed REFERENCE RELEASE OF LIABILITY even though the copy does not contain my original signature.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION CERTIFICATION**

- I hereby certify that all answers to the above questions are true and I agree and understand that any false statement contained in this application may cause rejection of this application or termination of employment, and shall constitute gross misconduct for benefit eligibility. I understand that an incomplete application may result in a lost job opportunity.
- I authorize the Town of Normal to contact my current and past employers and Personal References listed above to verify employment, work records, and suitability for employment with the Town, and to investigate personal, criminal or other areas, such as personal contact with neighbors, friends, or others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics, and mode of living
- I understand that I will have to provide acceptable documentation attesting that I am a U.S. Citizen or legal alien eligible for work in the United States. I also understand that I will not be appointed to a Town position until I have successfully completed the selection process, including a probationary period.
- I understand that this application is not a contract of employment. I understand that any oral or written statement to the contrary is expressly disavowed, and should not be relied upon by any prospective or existing employee.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Certificate of Applicant

(Read this statement carefully before signing)

I understand that any employment with the Town of Normal is considered **employment-at-will**. I understand that any employment relationship entered into with the Town may be terminated at any time for any or no reason.

I understand that the Town of Normal will conduct a criminal history screen as part of the employment process. The results of a criminal history screen will be used by the Town of Normal Parks & Recreation Department to ascertain the eligibility, appropriateness or fitness of all applicants/employees for work within the Normal Parks & Recreation Department. In conducting such screen the Town will comply with applicable Federal and State law. Based on this understanding, I knowingly consent to a criminal history screen conducted by the Town of Normal.

I hereby certify that all statements made on or in connection with this application, including those regarding my training and experience are true and complete to the best of my knowledge and belief and I understand and agree that any misstatements or omission of material fact herein will cause forfeiture on my part of all rights to employment by the Town of Normal.

I understand that I will have to provide acceptable documentation attesting that I am a U.S. Citizen or legal alien eligible for work in the United States.

**Applicant  
Signature**

\_\_\_\_\_

**Date:** \_\_\_\_\_

**Printed  
Applicant  
Name**

\_\_\_\_\_

## Equal Opportunity Employer