



# MARION PARK DISTRICT

## Application for Employment

*Marion Park District*  
519 Parish Avenue, Marion, IL 62959

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected

### Applicant Information

(PLEASE PRINT)

Position Applied for? \_\_\_\_\_ Date of application?

\_\_\_\_\_ For Lifeguards:

American Red Cross Lifeguard/First Air Certification \_\_\_\_\_ Yes \_\_\_\_\_ No Expires

\_\_\_\_\_ WSI certification \_\_\_\_\_ Yes \_\_\_\_\_ No Expires \_\_\_\_\_

Full Name \_\_\_\_\_

Address

Home phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Best time to contact you? \_\_\_\_\_ Social Security (voluntary)

If you are under the age of 18 years of age, can you provide required proof of your eligibility to work? \_\_\_\_\_

Do you have any friends/relatives who work here? \_\_\_\_\_ If yes, who?

Have you ever been employed with us before? \_\_\_\_\_ If yes, give date

\_\_\_\_\_

Are you able to work: full time part time temporary seasonal

Date available for work? \_\_\_\_\_

Desired salary? \_\_\_\_\_

Do you have a valid Illinois drivers' license? \_\_\_\_\_

### Education

High School:

Address:

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

College:

Address:

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

Other:

Address:

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

### Personal References

*Please list three personal references.*

Full Name:

Relationship:

Company:

Phone: ( )

Address:

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Full Name:

Relationship:

Company:

Phone: ( )

Address:

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Full Name:

Relationship:

Company:

Phone: ( )

Address:

### 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

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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

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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

**SKILLS:** Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert)


**Military Service**

Branch: From: To:  
Rank at Discharge: Type of Discharge:  
If other than honorable, explain:

## Disclaimer and Signature

**\*\*PLEASE READ CAREFULLY BEFORE SIGNING \*\***

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by the Marion Park District that such employment with the Marion Park District is "at will", for no specified duration and may be terminated by Marion Park District at any time, with or without cause or notice, unless such process is covered in a collective bargaining agreement.

I understand that none of the documents, policies, procedures, actions, statements of Marion Park District or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of the Marion Park District except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of the Board of Marion Park District.

In consideration for employment with Marion Park District, if employed, I agree to conform to the rules, regulations, policies and procedures of the Marion Park District at all times and understand that such obedience is a condition of employment. I understand that due to the nature of the Marion Park District business, attendance and punctuality are considered essential requirements of every job and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with the Marion Park District, I may be required to submit to a pre - employment medical examination, drug screening and background check as a condition of employment. I understand unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre - employments tests and checks will result in withdrawal of any employment offer or termination of employment if already employed. I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Marion Park District and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period, I must fill out and submit a new application.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

519 PARISH AVENUE, MARION, IL 62959 PHONE (618) 993-3940 FAX (618) 993-9094