

TOWNSHIP OF LYONS 6404 JOLIET RD. COUNTRYSIDE, IL 60525 708-482-8300

Employment Application

			Ap	plicant	Infor	matior					
Full Name:	Last	******						Date:			
	Last First						M.L.				
Address:		······································			·	~~~~					
	Street Address								Apartment/Unit	#	
	City						State		ZIP Code	·	
Phone:		***************************************			Email:_						
Date Availab	ole:	· · · · · · · · · · · · · · · · · · ·									
	lied for:										
	izen of the United States		YES	NO			authorized to wo	rk in th	YES	NO	
Have you eve	er worked for the Townsh	nip?	YES	NO	If yes,	when?					
Have you eve	er been convicted of a fel	ony?	YES	NO							
If yes, explain	n:			·	,,,,						
				Educ	ation						
High School:			A	\ddress:_							
From:	To:	_ Did y	you gra	aduate?	YES	NO	Diploma:				
College:			A	.ddress:_							
From:	То:	To: Did you graduate?			YES	NO	Degree:				
Other:			A	ddress:_		······································					
From:	To:	Did y	ou gra	duate?	YES	NO	Degree:				

References Please list three professional references. Full Name: Relationship: Company: Phone: Address: Relationship: Full Name: Company: Phone: Address: Full Name: Relationship: Company: Phone:____ Address: Previous Employment Company: Phone: Address: Supervisor:_____ Job Title: Responsibilities: Reason for Leaving: From: _____To: NO YES May we contact your previous supervisor for a reference? Company: Phone: Supervisor: Address: Job Title: Responsibilities: From: _____ To:____ Reason for Leaving: YES NO May we contact your previous supervisor for a reference?

Milita	ry Service							
Branch:	From:	To:						
Rank at Discharge:	Type of Discharge:							
If other than honorable, explain:								
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 the interview may result in my release.	at false or misleading informatio	n in my application or						
Signature:	Da	ite:						