



H.R. Department
60 State St., Suite 201
Peoria, IL 61602
Office: 309-671-4300
Fax: 406-327-6877

Application for Employment
PLEASE PRINT

PERSONAL

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Position desired \_\_\_\_\_

When would you be available to begin work? \_\_\_\_\_

Are you legally eligible to be employed in the United States? YES [ ] NO [ ]
(Proof of identity and eligibility will be required upon employment)

Are you over the age of 18 years? YES [ ] NO [ ]
(If no, you may be required to provide authorization to work)

Have you ever worked under another name? YES [ ] NO [ ] If YES, what was it and what was the reason for the change?

Have you ever worked for this Company before? YES [ ] NO [ ] If YES, where? \_\_\_\_\_
When? (Give dates) \_\_\_\_\_ Job Title: \_\_\_\_\_

Do you have any relatives who work for the Company? YES [ ] NO [ ] If YES, who and where do they work?

Have you ever been discharged from any employment or asked to resign? [ ] YES [ ] NO If YES, please explain:

List all traffic violations in past 5 years which resulted in a conviction, or a guilty plea. (A conviction will not necessarily result in the denial of employment. Rather such factors as age and date of conviction, seriousness and nature of crime, and rehabilitation will be considered).

List all at-fault traffic accidents in past 5 years.

During the last ten years, have you ever been convicted of a crime other than a minor traffic offense?

YES [ ] NO [ ] If YES, please explain: \_\_\_\_\_

(A conviction will not necessarily result in the denial of employment. Rather such factors as age and date of conviction, seriousness and nature of crime, and rehabilitation will be considered)

Are you available to work: DAYS [ ] NIGHTS [ ] WEEKENDS [ ] FULL TIME [ ] If you cannot work full time, please explain: \_\_\_\_\_

Are you presently employed? YES  NO  If YES, may we contact your employer? YES  NO   
 If presently employed, why are you considering leaving? \_\_\_\_\_

Do you belong to any professional, trade, business or civic organizations that deal with the position for which you are applying? YES  NO  If yes, please explain and list offices held: (Omit any organization which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.) \_\_\_\_\_

**EDUCATION**

	Name and Location of School	Course of Study	No. of Years Completed	Diploma or Degree Received
High School				
College				
Vocational or Trade School				
Graduate Work				

Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying? YES  NO  If yes, please describe: \_\_\_\_\_

List academic honors, extracurricular activities, offices held, etc. in high school or college: (Omit any which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.) \_\_\_\_\_

**EMPLOYMENT – Including U.S. Military Service. Start with your present or most recent position**

Name of Employer		Telephone Number ( )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/Day/Year	To Month/Day/Year	Rate of Pay Beginning	Final
Describe the Work Performed _____			
Name of Employer		Telephone Number ( )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/Day/Year	To Month/Day/Year	Rate of Pay Beginning	Final
Describe the Work Performed _____			

Name of Employer		Telephone Number (      )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/Day/Year	To Month/Day/Year	Rate of Pay Beginning	Final
Describe the Work Performed _____ _____ _____			

**PROFESSIONAL REFERENCES Give three individuals (not to include relatives or friends)**

Name	Occupation
Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____	Telephone Number (      )
Name	Occupation
Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____	Telephone Number (      )
Name	Occupation
Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____	Telephone Number (      )

**APPLICANTS WILL RECEIVE CONSIDERATION FOR POSITIONS, WITHOUT REGARD TO RACE, COLOR, RELIGION, AGE, SEX, EXCEPT WHERE SEX IS A BONAFIDE OCCUPATIONAL QUALIFICATION, SEXUAL ORIENTATION, MARITAL STATUS, INDIVIDUALS WITH DISABILITIES, AND EQUALLY TO DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA. WE ARE AN EQUAL OPPORTUNITY EMPLOYER. EEO/M/F/D/V**

**APPLICANT: IMPORTANT, PLEASE READ AND SIGN**

I understand that failure to reveal any prior employer, or giving false or misleading information by me on any part of this Application for Employment can be grounds for termination from the company or its' subsidiaries. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice. I also understand that the Company only considers me an applicant if I have applied for a specific vacancy.

Signed: \_\_\_\_\_

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

Printed Name: \_\_\_\_\_