



1231 Bonansinga Dr. - Quincy, Illinois 62301-1762  
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 Email [info@quincyparkdistrict.com](mailto:info@quincyparkdistrict.com)  
[quincyparkdistrict.com](http://quincyparkdistrict.com)

**Employment Application**

**Print All Information Legibly:**

<b>FULL Name:</b>				Date:	
Address			City:		
State:		Zip:		Phone Number:	
Email Address:			Previously Employed Here:		Yes <input type="checkbox"/> No <input type="checkbox"/>
At Least 16 years of age:		Yes	No		

**What type of work are you applying for?**

<input type="checkbox"/>	Umpire/Referee	<input type="checkbox"/>	Batting Cage	<input type="checkbox"/>	Park Maintenance
<input type="checkbox"/>	Activities	<input type="checkbox"/>	Pool	<input type="checkbox"/>	Westview Golf
<input type="checkbox"/>	Scorekeeper	<input type="checkbox"/>	Special Populations	<input type="checkbox"/>	Golf Maintenance
<input type="checkbox"/>	Tennis	<input type="checkbox"/>	Summer Playground	<input type="checkbox"/>	Office
<input type="checkbox"/>	Sport Field Maintenance	<input type="checkbox"/>	Fishing/Nature Programs	<input type="checkbox"/>	Park Ranger
<input type="checkbox"/>	Fitness Instructors	<input type="checkbox"/>		<input type="checkbox"/>	Other (Specify Below)
Specify Position:					
Are you legally eligible to work in the United States?					Yes <input type="checkbox"/> No <input type="checkbox"/>
Under State Law, you cannot work if you are under age. Can you produce a certificate of age?					Yes <input type="checkbox"/> No <input type="checkbox"/>
If hired, would you be able to work past 9:00 p.m.? You must be 16 years old or older.					Yes <input type="checkbox"/> No <input type="checkbox"/>

**Education**

	Name of School	Describe Specialized Training, Experience, Skills & Extracurricular Activities	Major Subject	Yrs Complete
High School				
College				
Other				

**Present Certifications/Education, Licenses, & Credentials:** (which are relevant to the job(s) for which you are applying)

First Aid: <input type="checkbox"/>	Life Guarding: <input type="checkbox"/>	Pesticide Licensing: <input type="checkbox"/>
CPR: <input type="checkbox"/>	Other:	

## Employment Record

Please list all of your work experience, beginning with your last employer. Attach additional sheets if necessary. All references and police records will be checked and any misstatement or deliberate falsification will be grounds for immediate dismissal.

Period		Employer's Name/ Address	Occupation	Reason for Leaving
From	To			
Immediate Supervisor				
Immediate Supervisor				
Immediate Supervisor				
Immediate Supervisor				

### References

Name	Address	Phone	Relationship

### Military Service

Have you ever been in the U. S. Military?      Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, give date entered service:		Date discharged:	
Rank or Grade at time of discharge:			

**"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you. I understand a criminal background check will be conducted and authorize the release of conviction information on me to the Quincy Park District. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice."**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_