

**OFFICE OF THE STATE'S ATTORNEY
COUNTY OF WINNEBAGO**

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS TO APPLICANT

1. You must fully and accurately complete this application. Incomplete applications will not be considered.
2. Any misrepresentation or omission of facts requested on this application may be grounds for rejection of this application or dismissal from employment if subsequently discovered.

PERSONAL BACKGROUND

1. Name _____
(Last) (First) (Middle)

Any other name by which
you may have been known: _____

2. Social Security Number _____ - _____ - _____ DOB _____

3. Home Address _____
(Street) (City) (State) (Zip)

4. Telephone Number: _____

5. If you hold a current Illinois Driver's License, please enter # _____

Enter the name of any other State(s) in which you
ever been licensed to drive a vehicle. _____

Has your driver's license ever been suspended or revoked? YES NO
If so what State? _____

6. If you are hired, can you supply proof of your date of birth? YES NO

7. Have you ever been convicted of a felony. YES NO

8. Have you ever been convicted of a serious misdemeanor such as theft,
gambling, possession of drugs, deceptive practices etc. that might be
relevant to your employment with the Office of State's Attorney? YES NO

EDUCATIONAL BACKGROUND

High School: Name of School _____

Location: _____

Dates Attended: _____

College(s) Name(s) _____

Location: _____

Dates Attended: _____

Degree(s) and Major(s): _____

Law School(s) Name: _____

Location: _____

Dates Attended: _____

Degree or graduation date: _____

References: Please list three references that are work or education based with name and phone number.

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT, ACADEMIC PERFORMANCE AND ANY PERTINENT INFORMATION THAT REFERENCE MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THAT REFERENCE FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING THE INFORMATION TO YOU.

I FURTHER AUTHORIZE YOU TO CONDUCT A CRIMINAL BACKGROUND CHECK ON ME IN ORDER TO VERIFY THE INFORMATION CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT IF HIRED, INFORMATION I LEARN IN THE COURSE OF MY WORK THAT IS NOT A MATTER OF PUBLIC RECORD MUST BE KEPT CONFIDENTIAL BY ME, AND I AGREE TO DO SO.

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.

DATE: _____

SIGNATURE: _____