



# Children's Museum of Illinois Employment Application

## Applicant Information

Last Name:		First:	MI
Street Address			Apt #
City	State	Zip Code	
Phone		Email	
Date Available:		Desired Salary:	
Position Applied For			
Are you a citizen of the United States? Yes No If no, are you authorized to work in the U.S.? Yes No			
Have you ever worked for us before? Yes No If so, when?			
Have you ever been convicted of a felony? Yes No If yes, explain:			
Why are you interested in working at CMofIL?			

## 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:

## References

Full Name		Relationship
Company		Phone:
Address		
Full Name		Relationship
Company		Phone:

Address
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**Previous Employment**

Company:	Phone
Address	Supervisor
Job Title	End Salary
Responsibilities	
From:            To:	Reason for Leaving:
May we contact your previous supervisor?	

Company:	Phone
Address	Supervisor
Job Title	End Salary
Responsibilities	
From:            To:	Reason for Leaving:
May we contact your previous supervisor?	

Company:	Phone
Address	Supervisor
Job Title	End Salary
Responsibilities	
From:            To:	Reason for Leaving:
May we contact your previous supervisor?	

**Military Service**

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

I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_