



# State Universities Civil Service System

## Administrative Division

1717 Philo Road, Suite 24  
Urbana, IL 61802-6099

## Application for Employment

(217) 278.3150 Phone

(217) 278.3159 FAX

(866) 488-4003 TTY

[www.sucss.illinois.gov](http://www.sucss.illinois.gov)

*An Equal Opportunity Employer/Affirmative Action Employer*

\_\_\_\_\_  
First Name

\_\_\_\_\_  
MI

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
County

\_\_\_\_\_  
Telephone Number

Are you authorized to work lawfully in the United States for this Agency?

Note: If hired, an I-9 form must be completed at the start of employment.

\_\_\_\_\_  
Type of work/position applying for

\_\_\_\_\_  
Date available to start

\_\_\_\_\_  
Minimum salary/rate desired

Type of employment applying for:

\_\_\_\_\_  
Hours available to work

Are you a United States Veteran?

If yes, and you desire preference based on your service, please furnish your DD214.

\_\_\_\_\_  
Begin Date of Service

\_\_\_\_\_  
End Date of Service

Additional Information

**Relevant Employment History** \*Note – list most recent positions first

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Name of Employer	Address, City, State, Zip	Telephone No.	Status
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Highest Title and Rank, Nature of Work	Date Started	Date Ended	Reason for leaving
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Highest Title and Rank, Nature of Work	Date Started	Date Ended	Reason for leaving
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**Education**

\_\_\_\_\_  
Name of Graduate School                      Address                      \_\_\_\_\_  
Date Started                      Date Ended

\_\_\_\_\_  
Course or Major Subject                      Years Credit, Degree, or Certification                      \_\_\_\_\_  
Did you graduate:

\_\_\_\_\_  
Name of College/University                      Address                      \_\_\_\_\_  
Date Started                      Date Ended

\_\_\_\_\_  
Course or Major Subject                      Years Credit, Degree, or Certification                      \_\_\_\_\_  
Did you graduate:

\_\_\_\_\_  
Name of High School                      Address                      \_\_\_\_\_  
Date Started                      Date Ended

\_\_\_\_\_  
Course or Major Subject                      Years Credit, Degree, or Certification                      \_\_\_\_\_  
Did you graduate:

\_\_\_\_\_  
Technical, Professional, or Specialized Training                      Address                      \_\_\_\_\_  
Date Started                      Date Ended

\_\_\_\_\_  
Course or Major Subject                      Years Credit, Degree, or Certification                      \_\_\_\_\_  
Did you graduate:

By signing below, I certify, authorize or acknowledge:

- That all information provided by me in this application, including resume and any other accompanying documents, is complete, true and correct and that no material misrepresentations or omissions are contained herein. I agree that any false information or omission of information given in this application or any attachments will void my application or, if hired, constitute sufficient grounds for termination.
- For purposes of verification, any persons, organizations, licensing agencies, and educational institutions referred to in this application and any attachments may be contacted to give information concerning my previous employment, education, experience, or licensing. I unconditionally and irrevocably release all persons, organizations or educational institutions from all liability that may result from providing information related to this application or any attachments.
- That upon request, a reasonable accommodation in accordance with the Americans with Disabilities Act will be made for me in the application process if I am disabled. Applicants that request a reasonable accommodation will be given the same consideration for employment as other applicants.
- That only the Executive Director can make an offer of employment to me and no one else may offer or promise me anything.
- That I am not in default on the repayment of any educational loan or any other loan from public funds in regards to the Educational Loan Default Act [5 ILCS 385].

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date