

WORLD SHOOTING COMPLEX EMPLOYMENT APPLICATION
ILLINOIS DEPARTMENT OF NATURAL RESOURCES

Position #

Title Applying for: _____

Name: _____ Sex: Male Female

Address: _____
Street City State Zip Code

County: _____ Phone #: _____

Drivers License #: _____ Expires: _____ Birth Date: _____

High School Graduate: Yes No # of Yrs Completed 0 1 2 3 4 _____ GED: Yes No

College Attendance: Yes No # of Yrs Completed 0 1 2 3 4 _____ Graduate: Yes No

Major: _____ Minor: _____

Selective Service # _____

(In accordance with State law males age 18 through 26 years old must possess a selective service number at the time this application is submitted in order to be considered eligible for hire.)
Selective Service # can be obtained by applying on line at www.sss.gov.

If your answer to any of the following questions is "yes", please attach a signed, detailed explanation.

A. Have you ever been fired from a job? (Downsize/layoff is not applicable) Yes No

B. Are you currently in default on the repayment of any State education Loan? Yes No

State Law provides that any employee who is in default on the repayment of any educational loan for a period of 6 months or more and in the amount of \$600.00 or more shall, as a condition of employment, make a satisfactory loan repayment arrangement with the maker or guarantor of the loan.

C. Are you currently receiving benefits from the State Retirement System? Yes No

Time period that you are available for employment _____ / _____ / _____ to _____ / _____ / _____

Can you work evenings/weekends if required? Yes No

Are you willing to work in adverse weather conditions? Yes No

Can you lift/carry & transport objects weighing 50 pounds or more? Yes No

Do you have any specialized skills related to Shooting Sports? Yes No

Please list: _____

Do you have any experience working in Customer Service and/or with the general public? Yes No

Please describe any Supervisory experience you have. _____

Do you have any knowledge of official shooting sports' and rules & regulations? (Explain) _____

EMPLOYMENT HISTORY

Employed by: _____ Dates: From _____ to _____

Address/City: _____ Job Title: _____

Description of Duties: _____

Reason for Leaving: _____

Contact Person: _____ Telephone #: _____

Employed by: _____ Dates: From _____ to _____

Address/City: _____ Job Title: _____

Description of Duties: _____

Reason for Leaving: _____

Contact Person: _____ Telephone #: _____

Employed by: _____ Dates: From _____ to _____

Address/City: _____ Job Title: _____

Description of Duties: _____

Reason for Leaving: _____

Contact Person: _____ Telephone #: _____

Employed by: _____ Dates: From _____ to _____

Address/City: _____ Job Title: _____

Description of Duties: _____

Reason for Leaving: _____

Contact Person: _____ Telephone #: _____

I certify that the information on this application is true and accurate to the best of my knowledge and misrepresentation of any material facts may be grounds for ineligibility and/or termination of employment.

Signature

Date