



Joshua C. Hill

Bond County Sheriff

403 South Second Street
Greenville, Illinois 62246



Office Phone: (618) 664-2151 Jail Phone: (618) 664-0243

Position applied for: _____ Date: _____

Name: _____
(Last Name) (First Name) (Middle Name) (Maiden Name)

Address: _____
(Street) (City) (State) (Zip code)

Telephone numbers: _____
(Home) (Cell)

Social Security #: _____

Are you currently employed? Yes: _____ No: _____

If Yes, may we contact your present Employer? Yes: _____ No: _____

Are you on a Lay-Off and subject to a recall? Yes: _____ No: _____

Are you applying for a **FULL** or **PART** time position? _____

Please indicate your availability: Days: _____ Afternoons: _____ Nights: _____

Have you ever been convicted of a Felony? Yes: _____ No: _____

If yes, what were the charges? _____

If yes, what was the name of the arresting agency? _____

If yes, what was the date of arrest? _____

Do you have a valid Illinois Driver's License? Yes: _____ No: _____

Are you a citizen of the United States? Yes: _____ No: _____

Are you a veteran of the U.S. Military? Yes: _____ No: _____

If yes, which branch? _____ Type of discharge? _____

Rank at discharge? _____ Served from: _____ to _____

Record of Education

Elementary School: _____

Address: _____

Attendance dates: _____

Did you graduate? _____

High School: _____

Address: _____

Attendance dates: _____

Did you graduate? _____

College or Trade School: _____

Address: _____

Attendance dates: _____

Did your graduate? _____

Other: _____

Address: _____

Attendance dates: _____

Did you graduate? _____

List any job related skills:

Additional comments:

Record of Employment

Position: _____

Employed from: _____ To: _____

Name of Employer: _____

Address: _____

(City)

(Zip code)

Telephone number: _____

Name of Supervisor: _____

Description of duties: _____

Reason for Leaving: _____

Position: _____

Employed from: _____ To: _____

Name of Employer: _____

Address: _____

(City)

(Zip code)

Telephone number: _____

Name of Supervisor: _____

Description of duties: _____

Reason for Leaving: _____

Position: _____

Employed from: _____ To: _____

Name of Employer: _____

Address: _____

(City)

(Zip code)

Telephone number: _____

Name of Supervisor: _____

Description of duties: _____

Reason for Leaving: _____

Personal References

Reference #1

Name: _____
(Last Name) (First Name)

Address: _____

Phone number: _____

How long have you known the above listed reference? _____

What is the nature of your association? (i.e., neighbor, friend, co-worker etc.)

Reference #2

Name: _____
(Last Name) (First Name)

Address: _____

Phone number: _____

How long have you known the above listed reference? _____

What is the nature of your association? (i.e., neighbor, friend, co-worker etc.)

Reference #3

Name: _____
(Last Name) (First Name)

Address: _____

Phone number: _____

How long have you known the above listed reference? _____

What is the nature of your association? (i.e., neighbor, friend, co-worker etc.)

Applicant's Statement

I certify that my answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment that may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract for employment. In the event of employment, I understand that false or misleading information given in this application or interview(s) may result in immediate discharge.

Applicant's signature: _____

Applicant's printed name: _____

Date: _____