

| RESUME FOR BOARD/COMMISSION CANDIDATES | | 1. NAME OF BOARD/COMMISSION FOR WHICH YOU ARE APPLYING | | | |
|---|---|--|--------------------|---|---|
| 2. PRINT NAME | | 3. <table style="width:100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> Female <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </td> <td style="width: 50%; vertical-align: top;"> Male <input type="checkbox"/> American Indian or Alaskan Native. A person having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community. <input type="checkbox"/> Asian or Pacific Islander. A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa. <input type="checkbox"/> Black not of Hispanic Origin. A person having origins in any of the black racial groups of Africa. <input type="checkbox"/> Spanish or Hispanic. A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture or origin, regardless of race. <input type="checkbox"/> White not of Hispanic Origin. A person having origins in any of the original people of Europe, North Africa or the Middle East. <input type="checkbox"/> Other: _____ </td> </tr> </table> | | Female <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Male <input type="checkbox"/> American Indian or Alaskan Native. A person having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community. <input type="checkbox"/> Asian or Pacific Islander. A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa. <input type="checkbox"/> Black not of Hispanic Origin. A person having origins in any of the black racial groups of Africa. <input type="checkbox"/> Spanish or Hispanic. A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture or origin, regardless of race. <input type="checkbox"/> White not of Hispanic Origin. A person having origins in any of the original people of Europe, North Africa or the Middle East. <input type="checkbox"/> Other: _____ |
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| 4. RESIDENCE ADDRESS (Street, City, State, ZIP Code) | | | | | |
| 5. E-MAIL ADDRESS(S) | | | | | |
| 6. SOCIAL SECURITY NUMBER | 7. DRIVER'S LICENSE NUMBER | | | | |
| 8. TELEPHONE NUMBER HOME: BUSINESS: CELL: | 9. COUNTY OF RESIDENCE | | | | |
| 10. PLACE OF BIRTH | 11. DATE OF BIRTH (M/D/Y) | | | | |
| 12. Have you ever been convicted of any criminal offense (s) in Illinois, or in another state, or in federal court (other than minor traffic violations)? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, attach explanation stating the date and place of conviction (s) and the nature of such offense (s).</i> | | | | | |
| 13. EDUCATION | | | | | |
| A. HIGH SCHOOL - Name and Location of Institution | | | | GRADUATED? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| B. COLLEGE - UNDERGRADUATE/BACCALAUREATE - Name and Location of Institution | | GRADUATED? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| NUMBER OF YEARS ATTENDED | CURRICULUM _____ Major _____ Minor | TYPE OF DEGREE GRANTED | DATE DEGREE ISSUED | | |
| COLLEGE - UNDERGRADUATE/BACCALAUREATE - Name and Location of Institution | | | | | |
| NUMBER OF YEARS ATTENDED | CURRICULUM _____ Major _____ Minor | TYPE OF DEGREE GRANTED | DATE DEGREE ISSUED | | |
| C. COLLEGE - POSTGRADUATE - Name and Location of Institution | | | | | |
| TYPE OF CURRICULUM | TYPE OF DEGREE GRANTED | DATE DEGREE ISSUED | | | |
| COLLEGE - POSTGRADUATE - Name and Location of Institution | | | | | |
| TYPE OF CURRICULUM | TYPE OF DEGREE GRANTED | DATE DEGREE ISSUED | | | |

14. Do you possess any professional License Qualifications, if Yes please complete below.

| Type of Licensure | License Number | Date of Licensure | State of Licensure | Current? |
|-------------------|----------------|-------------------|--------------------|--|
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

15. PROFESSIONAL EXPERIENCE - Time must be accounted for from graduation to present.

| DATE | | EMPLOYER NAME AND ADDRESS | DESCRIPTION OF EXPERIENCE |
|------|----|---------------------------|---------------------------|
| From | To | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

16. PROFESSIONAL ASSOCIATIONS/ACTIVITIES

17. HONORS/PUBLICATIONS/OTHER

I, _____, authorize the Village of Forest Park, Ill., to conduct an investigation into all aspects of my qualifications and background. I authorize any individual, organization, or agency which maintains records relating to me to provide these records upon request to any agency of the Village of Forest Park, Ill., conducting such an investigation. This authorization includes, but is not limited to, employment records, credit records, and criminal history records. I release any individual, organization, or agency from any and all liability incurred as a result of providing such records.

Signature _____

Date Submitted _____

CONFLICT OF INTEREST QUESTIONNAIRE

| If answer is "YES" to any of the following, please explain. | YES | NO |
|--|-----|----|
| 1. Have you or your company entered into any business or consulting contracts with the Village in the last three years? If so, list your partners (if any), and identify all Village departments with which you or your company have had a contract in the last three years. | | |
| 2. If you answered "Yes" to question number 1, please list the work performed | | |
| 3. Have you ever been named a party to any lawsuit or administrative proceeding? If so, please list county and year filed. | | |
| 4. Have you ever been arrested or convicted of a felony? | | |
| 5. Are you aware of any investigation of your conduct by any federal, state or local law enforcement agency? | | |
| 6. Have you ever served on a Village Commission or Board? | | |
| 7. If you answered yes to question #6 please list what board and when you served? | | |
| 8. Do you have any government-guaranteed loan outstanding? | | |
| 9. Is any member of your immediate family employed by the Village? | | |
| 10. Is there anything in your background, including any investments or real estate holdings, which might create or appear to create any conflict of interest with your appointment? | | |
| 11. Is there anything in your background which, if it were disclosed, might prove to be embarrassing to you or to the Mayor? | | |

Print Name of Applicant: _____ Date: _____

Signature of Applicant: _____

Authorization for Appointment Credit Report

I authorize the Forest Park Police to obtain a credit report on myself through the credit reporting agency of its choice.

Signature

Print Name

Current Address

City / State

Date

Appointment Process Statement

Appointments to Village Boards and Commissions are the privilege of the Mayor with the advice and consent of the Village Council. Completing this application is not a guarantee that you will be appointed. This is just one step in the appointment process.

Signature

Print Name

Date