



Dear Applicant:

Thank you for your interest in employment at PCCEO. The first step in the hiring process is the completion of an employment application. Please return application to the HR office located at 711 W McBean St or send electronically to pscott@pcceo.org.

You may also submit an electronic application by visiting www.pcceo.org

To help expediate the selection process, you should have:

- Three (3) letters of personal reference
- Copy of transcripts for education positions
- Verification of degree or certification, if applicable

Those qualified for the position will be contacted for an interview. At the interview, you will receive a job description and information on other services that PCCEO provides. You may be asked to return for a second interview before a final decision is made.

You will also be required to undergo a background check and a drug screen, if selected for the position. An offer letter will be sent to you for your review with all the pertinent information.

Thank you for your interest in the PCCEO and we wish you the best of luck!

EMPLOYMENT APPLICATION

Positions(s) Applied For: _____ Date of Application: _____

Name: _____ Social Security# _____

Address _____
STREET CITY STATE ZIP CODE

Telephone # _____ E-mail Address _____

Have you ever been employed here before? Yes No If yes, give dates: _____

Are you legally authorized to work in the U.S.? _____ Yes No

Date available for work _____ What is your desired salary \$ _____

Type of employment desired Full-Time Part-Time Temporary Seasonal Educational Co-Op

Will you travel if job requires it? _____ Yes No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? _____ Yes No

Will you work overtime or non-traditional hours if required? _____ Yes No

PCCEO employees must have and maintain a valid Illinois Driver's License and reliable transportation and insurance as required by the State of Illinois. Please provide the following information regarding your Driver's License.

Driver's license number _____ State _____ Expire Date _____

*****If the position you are applying is a Federal Early Head Start or Head Start Program, pursuant to 45 C.F.R. § 1302.90 (b) (5), the relevancy of each arrest, conviction, and pending criminal charge must be considered when determining how to act on your application.**

Have you ever been convicted of a felony, misdemeanor or ordinance violation other than non-moving traffic violations?
 Yes No .If Yes, complete the following (use additional paper if needed):

Nature of the Offense(s): _____

Date of conviction(s) _____

EMPLOYMENT HISTORY

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER #1	TELEPHONE # ()	DATES EMPLOYED FROM: _____ TO _____
ADDRESS		SUMMARIZE JOB DUTIES
IMMEDIATE SUPERVISOR AND TITLE		
REASON FOR LEAVING		
IF CURRENT EMPLOYER, MAY WE CONTACT FOR REFERENCE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		

EMPLOYER #2	TELEPHONE #	DATES EMPLOYED FROM TO
ADDRESS		SUMMARIZE JOB DUTIES
IMMEDIATE SUPERVISOR AND TITLE		
REASON FOR LEAVING		
IF CURRENT EMPLOYER, MAY WE CONTACT FOR REFERENCE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		
EMPLOYER #3	TELEPHONE #	DATES EMPLOYED FROM TO
ADDRESS		SUMMARIZE JOB DUTIES
IMMEDIATE SUPERVISOR AND TITLE		
REASON FOR LEAVING		
IF CURRENT EMPLOYER, MAY WE CONTACT FOR REFERENCE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		
EMPLOYER #4	TELEPHONE #	DATES EMPLOYED FROM TO
ADDRESS		SUMMARIZE JOB DUTIES
IMMEDIATE SUPERVISOR AND TITLE		
REASON FOR LEAVING		
IF CURRENT EMPLOYER, MAY WE CONTACT FOR REFERENCE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		

SKILLS AND QUALIFICATIONS

Please provide any licenses, certifications, special training, and or skills related to the job you are applying for with PCCEO.

EDUCATIONAL BACKGROUND

Please provide education information regarding the last three (3) schools attended.

A. SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE DIPLOMA	D. GPA CLASS RANK	E. MAJOR	F. MINOR

If you are applying for a position in the Head Start Department, please indicate the number of college credit hours you have completed in the field of Child Development or related field.

Hours Completed _____

Field of Education _____

REFERENCES

Do you know anyone who works for our company? Yes No. If yes, who? _____

Relationship to said employee? _____

List name and telephone number of three business/work references who are NOT related to you and are NOT previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	NUMBER OF YEARS KNOWN

List any additional information you would like us to consider. _____

PLEASE READ, INITIAL, AND SIGN THE NEXT PAGE

Applicant Statement (Please initial after each statement)

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. _____

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered. _____

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me. _____

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law. _____

I understand that this application remains current for only 6 months. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application. _____

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president. _____

I understand that I may be required to provide the necessary documentation in order to complete a standard criminal records disclosure. _____

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard. _____

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____

Date _____

Voluntary Affirmative Action Questionnaire

PCCEO, Inc is an equal opportunity employer. As required by law, we must record certain information to be made a part of our affirmative action program. Applicants for employment are invited to participate in the affirmative action program by reporting their status as a protected veteran or other minority. In extending this invitation, we advise you that: (a) workers (applicants) are under no obligation to respond but may do so in the future if they choose; (b) responses will remain confidential within the human resource department; and (c) responses will be used only for the necessary information to include in our affirmative action program. We are a company that values diversity. We actively encourage women, minorities, veterans and disabled employees to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Name: _____ Position Applied for: _____

Gender Male Female

Race or Ethnicity Identity* (select one, see next page for definitions)

- Hispanic or Latino
- White (not Hispanic or Latino)
- Black or African American (not Hispanic or Latino)
- Native Hawaiian or Pacific Islander (not Hispanic or Latino)
- Asian (not Hispanic or Latino)
- American Indian or Alaskan Native (not Hispanic or Latino)
- Two or more races (not Hispanic or Latino)

Veteran Status** (select one, see next page for definitions)

- I am a protected veteran
- I am NOT a protected veteran
- I do not wish to self-identify

Disability Status** (see next page for definitions)

Please check the below box if applicable. Self-identification of disability status is essential for effective affirmative action data collection and analysis. If you choose to self-identify your disability status, the information you provide will be used for statistical purposes only and will not affect your employment in any way.

Individual with Disabilities

Do you require any reasonable accommodations to attend the interview? _____ Yes No

If yes, please explain: _____

***EEOC RACE/ETHNIC IDENTIFICATION CATEGORIES**

Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Black or African American (not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.

Asian (not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

American Indian or Alaska Native (not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.

Two or more races (not Hispanic or Latino) - All persons who identify with more than one of the above races.

****PROTECTED VETERAN DEFINITION**

Protected veteran means a veteran who may be classified as an active duty wartime or campaign badge veteran, disabled veteran, Armed Forces service medal veteran or recently separated veteran.

Active duty wartime or campaign badge veteran means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.

Armed Forces service medal veteran means any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209, 3 CFR, 1996 Comp., p. 159).

Disabled veteran means (1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.

Recently separated veteran means a veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.

****DISABILITY DEFINITION**

A person has a disability if he or she has a physical or mental impairment which substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment. A handicap is "substantially limiting" if it is likely to cause difficulty in securing, retaining or advancing in employment.

**According to 41 CFR 60-741.42, there are only two circumstances when an employer may ask a disabled applicant to self-identify on a pre-offer basis: 1) The invitation is made when the contractor actually is undertaking affirmative action for individuals with disabilities at the pre-offer stage; or 2) The invitation is made pursuant to a Federal, State or local law requiring affirmative action for individuals with disabilities.