CHRIS KACHIROUBAS

Clerk of the 18th Judicial Circuit Court

An Equal Opportunity Employer - An At-Will Employer

Application for Employment

Please type or print in ink. Answer all items fully or indicate "N/A" if not applicable. Please attach additional sheets if more space is needed. The attachment of a resume is encouraged, but not required or accepted as a substitute for responses to any section of this application. This application will become inactive after 120 days. If you wish to be considered for employment after that time, you must complete a new employment application.

PERSONAL INFORMATION

Name:	Last	First	Middle

Present street address:

City:	State:	Zip Code:

Area codes and telephone numbers:

Day: Evening:

Email address:

Are you 18 years of age or older? * YES ☐ NO ☐

Are you a citizen of the United States? * YES ☐ NO ☐ *(Proof of citizenship will be required upon employment.)*

Are you a resident of the State of Illinois? * YES ☐ NO ☐

Have you ever been convicted of a felony? * YES ☐ NO ☐ *(If yes, give details):* _____

POSITION APPLIED FOR AND AVAILABILITY

Title of position desired:

Minimum acceptable annual salary:	Available start date:

Preferred status:
- ☐ Full-time (37.5 hours per week)
- ☐ Part-time (at least 20 but less than 30 hours per week)
- ☐ Seasonal/Temporary (less than 30 hours per week)

Working schedule you will accept *(check all that apply)* : ☐ Days ☐ Nights ☐ Holidays ☐ Evenings ☐ Weekends

How did you learn about the job opening?

Have you ever applied here before? YES ☐ NO ☐ If yes, when? _____

Have you ever worked for the DuPage County Circuit Court Clerk's Office? YES ☐ NO ☐

* 10 ILCS 5/7-10
10 ILCS 5/25-2
705 ILCS 105/9
Constitution of the State of Illinois, Article III

Upon completion please submit to: Clerk of the Circuit Court Attn.: Human Resources 505 N County Farm Road Wheaton IL 60187

EMPLOYMENT HISTORY

Company name:

Address:

City:	State:	Zip code:	Area codes and telephone number:

Name and title of immediate Supervisor:

Employment dates: From _____/_____ to _____/_____	Beginning salary: $	Ending salary: $

Are you currently working for this employer? YES ☐ NO ☐ If yes, may we contact? YES ☐ NO ☐

If no, please specify the reason for leaving: _____

Please list your job responsibilities in the box, below.

Company name:

Address:

City:	State:	Zip code:	Area codes and telephone number: ( )

Name and title of immediate Supervisor:

Employment dates: From _____/_____ to _____/_____	Beginning salary: $	Ending salary: $

Are you currently working for this employer? YES ☐ NO ☐ If yes, may we contact? YES ☐ NO ☐

If no, please specify the reason for leaving: _____

Please list your job responsibilities in the box, below.

Company name:

Address:

City:	State:	Zip code:	Area codes and telephone number: ( )

Name and title of immediate Supervisor:

Employment dates: From _____/_____ to _____/_____	Beginning salary: $	Ending salary: $

Are you currently working for this employer? YES ☐ NO ☐ If yes, may we contact? YES ☐ NO ☐

If no, please specify the reason for leaving: _____

Please list your job responsibilities in the box, below.

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Degree
High School:				
Undergraduate College:				
Graduate/ Professional:				
Other (Specify):				

SPECIALIZED SKILLS

Level of Proficiency *(please indicate by checking appropriate box)*

	Above Average	Average	Some	Little or no skill
Accounting	☐	☐	☐	☐
Bookkeeping	☐	☐	☐	☐
Cash register	☐	☐	☐	☐
Credit Card Machine	☐	☐	☐	☐
Copy Machine	☐	☐	☐	☐
Customer Service	☐	☐	☐	☐
Fax machine	☐	☐	☐	☐
General Computer	☐	☐	☐	☐
General Office	☐	☐	☐	☐
Inventory System	☐	☐	☐	☐
Computer Keyboard	☐	☐	☐	☐

Please indicate your level of proficiency in the listed types of computer software you have used on the job and/or you have had training. *(Please indicate by checking the appropriate box)*

Accounting Software	☐	☐	☐	☐
Case Management System	☐	☐	☐	☐
Spreadsheets	☐	☐	☐	☐
Word Processing	☐	☐	☐	☐

Describe any additional specialized training, apprenticeship or skills that are work-related:

REFERENCES

Please list three persons, not related to you, who have definite knowledge of your work qualifications. Do not include names of supervisors previously listed.

Full name	Present business or home address	Telephone number
Full name	Present business or home address	Telephone number
Full name	Present business or home address	Telephone number

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION

I certify that the statements made by me in this application are correct, complete and true to the best of my knowledge and are made in good faith. I understand that any false statements made herein will void this application and can, if hired, result in termination of my employment.

I authorize the Office of the DuPage County Circuit Court Clerk, to which I am applying, to investigate all statements contained in this application. I further authorize that office to secure any information from all of my employers, references, and academic institutions which may be relevant to an employment decision. I hereby release all of those employers, references, and academic institutions and the Office of the DuPage County Circuit Court Clerk to which I am applying from any and all liability arising from the giving or receiving of such information.

I understand and agree that, if hired, my employment is for no definite period, and that I may be terminated, with or without a reason, at any time and without prior notice.

Signature of Applicant X Date

Upon completion please submit to: Clerk of the Circuit Court Attn.: Human Resources 505 N County Farm Road Wheaton IL 60187