



**State of Illinois  
Office of the Secretary of State  
DEPARTMENT OF PERSONNEL**



**Student Worker Employment Application**

**Section I – PRINT OR TYPE ONLY**

|                                 |                      |                                   |                         |  |
|---------------------------------|----------------------|-----------------------------------|-------------------------|--|
| Social Security Number          |                      | Date of Birth (Optional)          |                         |  |
| Last Name                       |                      | First Name                        |                         | Middle Initial   |
| Street Address                  |                      |                                   | County of Residence     |  |
| City                            | State                | ZIP Code                          |                         | List the County in which you wish to work.<br>1. _____<br>2. _____<br>3. _____ |
| Primary Telephone Number<br>( ) |                      | Alternate Telephone Number<br>( ) |                         |  |
| <b>DRIVER'S LICENSE</b>         |                      |                                   |                         |  |
| State Issued                    | Class Rating-Non-CDL | Class Rating-CDL                  | Driver's License Number | Date Expires<br>MO DY YR   |

**APPLICATIONS WILL NOT BE ACCEPTED UNLESS ALL QUESTIONS ARE ANSWERED AND REQUIRED ATTACHMENTS ARE SUBMITTED.**

1. Have you ever been discharged from a job? YES \_\_\_ NO \_\_\_  
(If "YES," attach detailed explanation; layoff/downsizing does not apply.)
2. Have you ever pled guilty, been found guilty or been convicted of any criminal offense other than a minor traffic violation? (If "YES," attach statement with date(s), charge(s) and sentence(s). Expunged or sealed convictions need not be disclosed.) YES \_\_\_ NO \_\_\_
3. Are you currently in default on repayment of any state education loan? YES \_\_\_ NO \_\_\_
4. Is any member of your family employed by the Office of the Secretary of State? YES \_\_\_ NO \_\_\_  
(If "YES," please state: NAME OF EMPLOYEE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_)

\*State law requires an employee in default on repayment of any education loan for 6 months or more and in the amount of \$600 or more shall, as a condition of employment, make satisfactory repayment arrangements with the maker or guarantor of the loan.

**IMPORTANT NOTICE:** To be eligible for the Student Worker Program you **MUST** be enrolled as a student for the following school year. **APPLICANT MUST** indicate below where he/she is enrolled or intends to enroll for continued education.

I am currently enrolled in:  High School  College

In September, I will be enrolled in:  High School  College

Name of School/College: \_\_\_\_\_

**Your application will be returned if this information is not provided.**

I authorize release of any information supplied on this application for purposes of verification and determination of suitability for Student Worker employment through a background check. I certify that the information, education and work experience listed on this application is true and accurate to the best of my knowledge, and I understand that misrepresentation of any material may be grounds for ineligibility or termination of employment.

\_\_\_\_\_  
**Written Signature of Applicant (REQUIRED)**

\_\_\_\_\_  
**Date**

**THE OFFICE OF THE SECRETARY OF STATE IS AN EQUAL OPPORTUNITY EMPLOYER.**

**List and describe any volunteer or paid work experience.  
Begin with your most recent position and work back.**

|                                  |  |  |
|----------------------------------|--|--|
| <b>JOB # 1</b>                   | Employed by: _____   | <b>Dates of Employment:</b><br>From: _____ To: _____<br>(mo / yr) (mo / yr)  |
|                                  | Address: _____   | <b>Total Number of:</b><br>_____ (years) _____ (months)                      |
|                                  | City / State: _____  | <b>Monthly Salary:</b><br>Starting Salary \$ _____<br>Ending Salary \$ _____ |
|                                  | Payroll Title: _____   | <b>Average hours worked per week:</b> _____                                  |
|                                  | List and describe your duties and responsibilities:<br>_____<br>_____<br>_____ |  |
| <b>Reason for Leaving:</b> _____ |  |  |

|                                  |  |  |
|----------------------------------|--|--|
| <b>JOB # 2</b>                   | Employed by: _____   | <b>Dates of Employment:</b><br>From: _____ To: _____<br>(mo / yr) (mo / yr)  |
|                                  | Address: _____   | <b>Total Number of:</b><br>_____ (years) _____ (months)                      |
|                                  | City / State: _____  | <b>Monthly Salary:</b><br>Starting Salary \$ _____<br>Ending Salary \$ _____ |
|                                  | Payroll Title: _____   | <b>Average hours worked per week:</b> _____                                  |
|                                  | List and describe your duties and responsibilities:<br>_____<br>_____<br>_____ |  |
| <b>Reason for Leaving:</b> _____ |  |  |

|                                  |  |  |
|----------------------------------|--|--|
| <b>JOB # 3</b>                   | Employed by: _____   | <b>Dates of Employment:</b><br>From: _____ To: _____<br>(mo / yr) (mo / yr)  |
|                                  | Address: _____   | <b>Total Number of:</b><br>_____ (years) _____ (months)                      |
|                                  | City / State: _____  | <b>Monthly Salary:</b><br>Starting Salary \$ _____<br>Ending Salary \$ _____ |
|                                  | Payroll Title: _____   | <b>Average hours worked per week:</b> _____                                  |
|                                  | List and describe your duties and responsibilities:<br>_____<br>_____<br>_____ |  |
| <b>Reason for Leaving:</b> _____ |  |  |

**RETURN COMPLETED APPLICATION TO:**

Secretary of State  
Personnel Department  
196 Howlett Building  
Springfield, IL 62756

Secretary of State  
Personnel Department  
17 N. State St., Ste. 1300  
Chicago, IL 60602