

Classified Personnel

AN EQUAL OPPORTUNITY EMPLOYER
PERSONNEL SERVICES
Glen Ellyn, Illinois 60137
Telephone (312) 858-2800

INSTRUCTIONS

1. Full and satisfactory answers must be made to every question. Intentional misstatements may be cause for dismissal if hired.
2. Permission to file an application does not imply that the applicant will eventually be employed but that the application will be considered in competition with others on file, when a vacancy occurs.
3. Before employment, applicants may be requested to pass a physical examination satisfactory to the College.
4. Application will be kept on file only six months unless renewed by you.

DATE April 17 19 78

EMPLOYEE NUMBER: _____
(FOR OFFICE USE ONLY)

NAME: VALENIA JOHN J
(Last) (First) (Middle)

Have you ever worked under or used a different name, such as maiden name, nickname, etc? Yes No If yes, give name _____

ADDRESS: _____
(Street and Number) (City) (State) (Zip)

Social Security Number: _____ Home: _____
Phone Number: _____ Work: _____

If Hired, Will You Furnish Proof of Age? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are You in the United States on a Visa Which Would Not Permit You to Work Here? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are You a Veteran of U.S. Armed Forces? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Branch of Service: <u>AIR FORCE / AIR NATIONAL GUARD</u> Entrance Date: <u>NOVEMBER 1971</u> Describe Special Training You Received <u>GROUND ELECTRONICS</u>
Condition of Health: <u>EXCELLENT</u>		Have You Received Notice to Report for Duty in the Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No
Physical Disabilities, if Any: <u>None</u>		

Give name, address and telephone number of person to be notified in case of emergency: _____

EDUCATION:

Grade School—Circle number of years completed: 1 2 3 4 5 6 7 **(8)**

Name and Location of School	No. of Years Completed	Dates Attended	Did You Graduate?
High School: <u>Riverside - Brookfield HS. Riverside IL</u>	<u>4</u>	<u>1963 - 1967</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Business College:			<input type="checkbox"/> Yes <input type="checkbox"/> No
College or University: <u>DeVry Institute of Technology</u> <u>Loyola University - Chicago, IL</u>	<u>4</u>	<u>1965 - 1974</u>	Degree, if any <u>B.E.T.</u>
Special Training: Explain			<input type="checkbox"/> Yes <input type="checkbox"/> No

College/University Major: ELECTRONIC ENGINEERING Minors: _____

EMPLOYMENT HISTORY Begin with most recent employment and list all jobs in reverse order.

Name, Address and Phone Number of Firm	Kind of Work	From	To	Reason for Leaving	Salary
1. Last Employer: WFJR RADIO 130 E. RANDOLPH CHICAGO, IL Telephone Number: 561-8100 Supervisor: WARREN SHULZ	ASSISTANT CHIEF ENGINEER	2/76	4/78	Better Position	15,500 ⁰⁰
2. Other Employment: VHF COMMUNICATIONS 1105 E 31 ST ST. LAGANNAE PK, ILL Telephone Number: 352-8997 Supervisor: DAN SVOBEDA	MAINTENANCE TECHNICIAN	10/68	2/76	OBTAIN POSITION IN BROADCASTING	12,500 ⁰⁰
3. Other Employment: Telephone Number: _____ Supervisor: _____					

PLEASE GIVE THE FOLLOWING INFORMATION

For what kind of position are you applying? RADIO STATION CHIEF ENGINEER Full Time Part Time

Other work you would consider: 1. _____ 2. _____

Can you accept a position immediately? Yes No If not, how soon: _____

How did you happen to apply for work here? Referred by Contract Engineer

Have you ever worked here before? No When? _____ Department? _____

Reason for leaving: N/A

Have you ever been suspended or discharged from any position? Yes No

If yes, give reason: N/A

Have you ever been convicted of a felony? Yes No

Why would you like to work at College of DuPage FEEL I CAN DO A EXCELLENT JOB AND WOULD BETTER MY POSITION IN THE FIELD OF BROADCASTING.

REFERENCES: May be personal or business references. (Do not use employers listed on preceding page or relatives.)

Name	Address	Profession, business, or occupation of reference

IMPORTANT TO APPLICANT: Have we your permission to contact these references and employers mentioned on preceding page? Yes No

PERSONS IN OUR EMPLOY WITH WHOM YOU ARE ACQUAINTED

Name	Position	Relationship	How long have you know them?

APPLICANTS FOR OFFICE AND CLERICAL POSITIONS

Please check kinds of work you can perform:

- | | | |
|---|--|---|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Editorial | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Auditing | <input type="checkbox"/> Filing | <input type="checkbox"/> Statistical |
| <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Mail | <input type="checkbox"/> Stencil Cutting |
| <input type="checkbox"/> Clerical (General) | <input type="checkbox"/> Mathematics/Computation | <input type="checkbox"/> Stenographic (Shorthand Speed _____) |
| <input type="checkbox"/> Collections | <input type="checkbox"/> Messenger | <input type="checkbox"/> Stock Keeping |
| <input type="checkbox"/> Correspondence | <input type="checkbox"/> Order | <input type="checkbox"/> Switchboard or PBX |
| <input type="checkbox"/> Drafting | <input type="checkbox"/> Payroll | <input type="checkbox"/> Typing (Typing Speed _____) |
| | <input type="checkbox"/> Printing | <input type="checkbox"/> Writing |
| | <input type="checkbox"/> Proofreading | |

Check and state kind of office equipment you can operate.

- | | | |
|---|---|---|
| <input type="checkbox"/> Adding Machines | <input type="checkbox"/> Duplicating Machines | <input type="checkbox"/> Key Punch |
| <input type="checkbox"/> Calculating Machines | <input type="checkbox"/> Ediphone or Dictaphone | <input type="checkbox"/> Programmable Calculators |
| <input type="checkbox"/> Computer Terminal | <input type="checkbox"/> IBM Machines | |
- Languages you can speak _____

Federal and state laws prohibit discrimination because of race, country of origin, religion, color, age, sex or non-job-related handicap.

Public Law 91-508 requires that we advise you that a routine inquiry may be made which will provide applicable information concerning character, general reputation and personal characteristics. It is understood that employment, if afforded, is PROBATIONARY for the first THREE MONTHS and that you may be dismissed at any time during this period for any reason at the College's discretion.

I voluntarily give College of DuPage the right to make any investigation of my background deemed necessary. I also consent to a pre-employment physical if requested. I further understand that any false answer or statements made by me on this application, or any supplement thereto, will be grounds for immediate discharge.

Applicant's Signature _____