

Metropolitan Airport Authority of Peoria
6100 W. Dirksen Parkway
Peoria, IL 61607

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer: In compliance with Federal, State and Local employment opportunity laws, the Metropolitan Airport Authority of Peoria (“MAAP”) will consider all qualified candidates for employment without regard to race, color, creed, religion, sex, sexual orientation, age, marital status, military status, certain unfavorable discharges from military service, citizenship, ancestry, national origin, physical or mental handicap or disability or any other characteristic protected by law.

Accommodations: Consistent with the Americans with Disabilities Act, you may request accommodations needed to participate in the application process.

Application Instructions: Please print and fill out application **completely** – do not refer to resume. Incomplete applications may prevent you from being considered for employment. Applications will remain active for thirty (30) days.

Personal Information		
Name (Last, First, M.I.)	Social Security Number	
Street Address (include Mailing Address if different)	Home Telephone	
City, State, Zip	Work Telephone	
E-mail address	May we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
How did you learn about us? <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Walk-In <input type="checkbox"/> Employee (specify) _____ <input type="checkbox"/> Advertisement (specify)_____ <input type="checkbox"/> Employment Agency (specify)_____		
<input type="checkbox"/> Internet Website (specify which site) _____		
MAAP is required to verify an employee's lawful right to work in the United States. If hired, will you be able to provide this required documentation? <div style="text-align: center;"><input type="checkbox"/>Yes <input type="checkbox"/>No</div>		
MAAP must conduct criminal background verification on every applicant. Please complete the Criminal Background Verification on pages 5 and 6.		
Have you been convicted of any crime within the past ten (10) years?* <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, give date of conviction and specific information: _____ _____		
*NOTE: You are not obligated nor will MAAP ask you to disclose sealed or expunged records of convictions or arrests. Conviction does not necessarily disqualify an applicant from employment. The severity, pertinence and date of the conviction will all be considered.		

Employment Desired and Hours Available							
Position(s) Applying For				Date Available		Salary Desired	
Type of work desired Please rank in order of preference, or mark N/A for "not applicable": <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time, over 20 hrs per week <input type="checkbox"/> Part-time, under 20 hrs per week <input type="checkbox"/> Seasonal/Temporary (explain) _____							
Hours available to work: *	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							
Total hours available per week			Are you able to work beyond your assigned shift or work overtime if needed? *				
			<input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you now under any non-competition obligations, or do you have any other interest, which is inconsistent or in conflict with duties that may be assigned by MAAP? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Have you ever applied with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No		For What Position?			When?		
Have you ever been employed with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No		In What Position?			When?		
Do you have any relatives that are currently working for us? <input type="checkbox"/> Yes <input type="checkbox"/> No		Who?			What Department?		

*** NOTE: You are not obligated nor will MAAP ask you to disclose whether you might request time off during these hours for religious practices. Applicants who require an accommodation for religious practices will not be excluded from consideration or otherwise subject to discrimination.**

Education

	Name of School City, State	Course of Study	Years Completed	Did you graduate?	Degree Earned
High School			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/University			1 2 3 4 5+	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business, Correspondence School or Other			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Please list special skills and/or qualifications you possess that directly relate to the position for which you are applying, such as knowledge of software, computer programs, and machinery and/or other office equipment you operate:

Please list workshops, courses, certification, or training you have completed that directly relate to the position for which you are applying:

Why are you interested in MAAP and/or this position?

Employment History

Instructions: List your last four previous employers below, starting with your most recent employer. Attach additional sheets if necessary. Explain any gaps in employment at the end of the page. All information MUST be completed. You may not substitute a resume for this application, although a resume may be attached for additional information.

Employer #1 --- Current or Most Recent Employer

May we contact your current employer? Yes No If no, please explain: _____

Employer Name	From (mo/yr)	To (mo/yr)	Employment was:
Employer Address, City, State	Employer Telephone	Start Position	End Position
Supervisor Name	Start Salary	End Salary	Are you currently employed with this company? <input type="checkbox"/> Yes <input type="checkbox"/> No
Duties performed and skills used or learned:			Reason for leaving or looking for other employment: _____
			<input type="checkbox"/> Voluntary <input type="checkbox"/> Involuntary

Employer #2

Employer Name	From (mo/yr)	To (mo/yr)	Employment was:
Employer Address, City, State	Employer Telephone	Start Position	End Position
			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal/Temp

Supervisor Name	Start Salary	End Salary	Are you currently employed with this company? <input type="checkbox"/> Yes <input type="checkbox"/> No
Duties performed and skills used or learned:		Reason for leaving or looking for other employment: _____	
		<input type="checkbox"/> Voluntary <input type="checkbox"/> Involuntary	

Employer #3

Employer Name	From (mo/yr)	To (mo/yr)	Employment was:
Employer Address, City, State	Employer Telephone	Start Position	End Position
		<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal/Temp	
Supervisor Name	Start Salary	End Salary	Are you currently employed with this company? <input type="checkbox"/> Yes <input type="checkbox"/> No
Duties performed and skills used or learned:		Reason for leaving or looking for other employment: _____	
		<input type="checkbox"/> Voluntary <input type="checkbox"/> Involuntary	

Employer #4

Employer Name	From (mo/yr)	To (mo/yr)	Employment was:
Employer Address, City, State	Employer Telephone	Start Position	End Position
		<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal/Temp	
Supervisor Name	Start Salary	End Salary	Are you currently employed with this company? <input type="checkbox"/> Yes <input type="checkbox"/> No
Duties performed and skills used or learned:		Reason for leaving or looking for other employment: _____	
		<input type="checkbox"/> Voluntary <input type="checkbox"/> Involuntary	

Gaps in Employment

Dates		Explain gaps in employment longer than 30 days <input type="checkbox"/> Not Applicable
From	To	Reason
From	To	Reason
From	To	Reason

Other References

Instructions: List four references you have known for at least one year. Do not list persons related to you or persons already listed in the Employment Section.

	Name/Occupation	Address, City, State	Telephone	Years Acquainted	Relationship (Check all that apply)
1.					<input type="checkbox"/> Work-related <input type="checkbox"/> Personal
2.					<input type="checkbox"/> Work-related <input type="checkbox"/> Personal
3.					<input type="checkbox"/> Work-related <input type="checkbox"/> Personal
4.					<input type="checkbox"/> Work-related <input type="checkbox"/> Personal

Criminal Background Verification

Where specific citations are listed, both the current citation and the citation that applied before the statues are recodified in 1994 are listed.

Yes No

<input type="checkbox"/>	<input type="checkbox"/>	Forgery of certificates, false making of aircraft, and other aircraft registration violations, 49 U.S.C 46306 [formerly U.S.C. App.1472(b)]
<input type="checkbox"/>	<input type="checkbox"/>	Interference with air navigation, 49 U.S.C. 46308 [formerly 49 U.S.C App. 1472(2)]
<input type="checkbox"/>	<input type="checkbox"/>	Improper transportation of a hazardous material, 49 U.S.C 46312 [Formerly 49 U.S.C. App. 1472(b)(2)]
<input type="checkbox"/>	<input type="checkbox"/>	Aircraft piracy, 49 U.S.C. 46502 [formerly 49 U.S.C. Ap. 1472(j)]
<input type="checkbox"/>	<input type="checkbox"/>	Interference with flight crew members or flight attendants, 49 U.S.C. 46504 [formerly 49 U.S.C. App. 1472(j)]
<input type="checkbox"/>	<input type="checkbox"/>	Commission of certain crimes aboard aircraft in flight, 49 U.S.C 46506 [formerly 49U.S.C. App. 1472(k)]
<input type="checkbox"/>	<input type="checkbox"/>	Carrying a weapon or explosive aboard an aircraft, 49U.S.C. 46505 [formerly 49 U.S.C. App. 1472(i)]
<input type="checkbox"/>	<input type="checkbox"/>	Conveying false information and threats, 49U.S.C. 46507 [formerly 49U.S.C. App. 1472(m)]
<input type="checkbox"/>	<input type="checkbox"/>	Aircraft piracy outside the special aircraft jurisdiction of the United States, 49U.S.C. 446502 [formerly 49U.S.C App. 1472(n)]
<input type="checkbox"/>	<input type="checkbox"/>	Lighting violations involving transporting controlled substances, 49 U.S.C. 46315 [formerly 49U.S.C. App. 1472(q)]
<input type="checkbox"/>	<input type="checkbox"/>	Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements, 49 U.S.C. 46314 [formerley49 U.S.C. App. 1472(r)]
<input type="checkbox"/>	<input type="checkbox"/>	Destruction of an aircraft or aircraft facility, 18 U.S.C. 32
<input type="checkbox"/>	<input type="checkbox"/>	Murder
<input type="checkbox"/>	<input type="checkbox"/>	Assault with intent to murder
<input type="checkbox"/>	<input type="checkbox"/>	Espionage
<input type="checkbox"/>	<input type="checkbox"/>	Sedition
<input type="checkbox"/>	<input type="checkbox"/>	Kidnapping or hostage taking
<input type="checkbox"/>	<input type="checkbox"/>	Treason
<input type="checkbox"/>	<input type="checkbox"/>	Rape or aggravated sexual abuse
<input type="checkbox"/>	<input type="checkbox"/>	Unlawful possession, use, sale, distribution, or manufacture or and of an explosive or weapon
<input type="checkbox"/>	<input type="checkbox"/>	Extortion
<input type="checkbox"/>	<input type="checkbox"/>	Armed robbery
<input type="checkbox"/>	<input type="checkbox"/>	Distribution of or intent to distribute a controlled substance
<input type="checkbox"/>	<input type="checkbox"/>	Felony arson
<input type="checkbox"/>	<input type="checkbox"/>	Felony unarmed robbery
<input type="checkbox"/>	<input type="checkbox"/>	Felony involving a threat
<input type="checkbox"/>	<input type="checkbox"/>	Felony involving willful destruction of property
<input type="checkbox"/>	<input type="checkbox"/>	Felony involving importation of manufacture of a controlled substance
<input type="checkbox"/>	<input type="checkbox"/>	Felony burglary
<input type="checkbox"/>	<input type="checkbox"/>	Felony theft

- Felony involving dishonest, fraud, or misrepresentation
- Felony possession of distribution of stolen property
- Felony aggravated assault
- Felony bribery
- Felony involving illegal possession of a controlled substance punishable by a maximum term imprisonment of more than 1 year
- Any other crime classified as a felony that the FAA administrator determines indicates a propensity for placing contraband aboard an aircraft in return for money
- Conspiracy or attempt to commit any of the aforementioned criminal acts

Application Notification and Authorization

Read the following information carefully before signing below.

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation of these facts may be grounds for rejection of this application, denial of employment or, if employed, for dismissal if subsequently discovered.

In connection with my application for employment with MAAP, I understand that investigations and inquiries may be made concerning my background and qualifications, including but not limited to my past employment or employment references, education, credit history, criminal convictions and history, motor vehicle reports, and other inquiries. By signing this application/statement, I hereby authorize and release without reservation all parties, including MAAP and its employees or representatives, from any and all claims, actions, suits and/or liabilities arising from the release or pursuit of any such information. I understand that this release does not operate to relieve any party of liability under applicable non-discrimination and fair employment practices laws. In the event MAAP uses an outside investigative consumer-reporting agency, MAAP will notify me.

I understand that filling out this form does not indicate there is a position open and does not obligate MAAP to hire me. If hired, I understand that I will be required to submit documents sufficient to establish employment authorization and identity in compliance with the Immigration Reform and Control Act of 1986. In consideration of my employment, I agree to abide by the rules and regulations of MAAP.

I understand and agree that, if hired, I will abide by the employment guidelines established by MAAP including the guidelines on employee conduct. **As a condition of employment, I acknowledge that I received, read, and if hired, agree to strictly abide by MAAP's Sexual and Other Discriminatory Harassment Policy, Disclosure and Non-Retaliation Policy, and Computer/Internet/E-Mail Policy.** Conduct, whether intentional or unintentional, which results in the harassment of others, regarding race, color, religion, sex, age, national origin, sexual orientation, disability or any other protected characteristic as established by federal, state, and local law is illegal and will not be tolerated. Such conduct violates MAAP policy and will result in disciplinary action, up to and including termination.

I understand and agree that, if hired, my employment is for no definite period and regardless of the date of payment of my wages or salary, and my employment can be terminated at any time, with or without cause or notice, at the option of either MAAP or myself. I further understand that only MAAP's Director of Airports or another person specifically designated by MAAP's Director of Airports has the authority to create or enter into any employment agreement on behalf of MAAP and this employment agreement will not be enforceable unless it is in writing and signed by MAAP's duly authorized representative and me.

Applicant Signature: _____ Date: _____

We appreciate your interest in our organization. Thank you for taking the time to complete this application.