

Music Institute of Chicago

Application for Employment

*Applications for all positions are considered without discrimination because of race, color, gender, identity, age, religion, national origin, disability, veteran status, sexual orientation, or any other protected status. **Please complete all sections thoroughly; incomplete applications will not be accepted.** (If more space is needed for any section, please provide it on a separate sheet and attach to this application.)*

Personal Information

Date: _____

Name (last, first, middle): _____

Address (city, state, zip): _____

Length of residence at this address: _____

If less than 3 years at above address, most recent former address:

Telephone (home): _____

Telephone (cell): _____

Email address: _____

Do you have a high school diploma or equivalent? _____ yes _____ no

Are you legally eligible for employment in the United States and able to provide necessary documentation?

_____yes _____no

Have you been convicted of a felony within the last 7 years? _____yes _____no

If yes, please explain: _____

(Note: Applicants are not obligated to disclose expunged juvenile records of adjudication or arrest.)

Has an accrediting body or licensing board ever taken action against you? _____yes _____no

If yes, please explain: _____

How did you learn of the Music Institute of Chicago? _____

Position(s) desired: _____

Hourly rate/Salary desired: _____ Date available: _____

Have you ever applied for employment with us? _____yes _____no

If yes: Month and year _____ Position applied for : _____

Are you able to meet the attendance and scheduling requirements of the position(s) for which you are applying? _____yes _____no

Are you able to perform the essential functions of the job with or without a reasonable accommodation?
_____yes _____no

If accommodation requested, please explain:

Are you employed now? _____yes _____no

If yes, may we verify your employment with your current employer(s)? _____yes _____no

Name of current employer _____

Contact name and phone number _____

COVID 19 NOTICE: Effective September 1, 2021, all employees and visitors are required to wear a mask or face covering at all campuses and work locations. ***In addition, all current and new employees are required to be fully vaccinated or follow CDC vaccination guidelines.***

Education

Type of School	Name and Location of School (City, State)	Number of Years Completed	Did You Graduate?	Degree Received (If applicable)
High School				
College or University				
Graduate School				
Other				

***Employment History (Including military service, if any.) List most recent job first. You must account for at least the past 10 years, including any periods of unemployment.)**

Dates (mo/yr)	Name, Location, Phone Number of Employer	Position Title and Duties	Supervisor	Reason for Leaving
From: To:				
From: To:				
From: To:				
From: To:				

**If more space is needed please use a separate sheet and clearly identify information provided.*

***Professional References**

Name	Address and Email Address	Telephone Number	Years known
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

**If more space is needed please use a separate sheet and clearly identify information provided.*

Other Skills and Qualifications. List any other skills or training relevant to the position:

"I certify that the information provided in this application is true and complete to the best of my knowledge, and that false or misleading information may result in termination or in withdrawal of my consideration of employment. I authorize investigation of all information provided and release all parties from liability that may result from furnishing such information. I understand that any listed references and former employers may be contacted, and that I will be notified prior to references being checked. I acknowledge and understand that the organization is an "at will" employer and that this document does not constitute an employment contract, and that if hired, my employment may be terminated at any time, for any reason, with or without notice by me or by the Music Institute of Chicago."

Applicant Signature

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Date Signed