

CHOOSE CHICAGO EQUITY, DIVERSITY & INCLUSION APPRENTICESHIP PROGRAM

2023 - 2024 Application Form (Please type)

I.	Applicant Information					
Last N	ame	First Name	MI			
Permanent Street Address						
City		State	Zip			
Phone	Number	Cell				
Email_						
Will yo	ou be 21 years of age or older by the start	of this program?	Yes No			
Since th	is program involves working events with alcohol at	times, the opportunity is limit	ted to applicants 21 years of age and over.			
Are yo	u legally eligible for employment in the U	nited States? Y	es No			
	olicants must be fully vaccinated as defin oose Chicago and our sponsoring partne	•	sease Control (CDC) to perform any work MA. Proof of documentation required.			
Demo	graphic Information					
Choose Chicago is an equal opportunity employer; however, as the Apprenticeship Program has a specific remit to engage underrepresented and ethnically diverse college graduates, we ask that you please answer the following:						
<u>Gende</u>	r Identification:					
o Fem	ale o Male o Other	o I do not wish t	to disclose			
Race/Ethnic Identification Origin:						
o Blac	k or African-American o Hispanic or Latin	o o Asian-American o Pa	acific Islander			
o Native American o Caucasian o Other o I do not wish to disclose						
II.	Employment Status					
Currer	nt Employment Status o Employed o I	Not Employed				
*Are you available to work at least 32 hours per week beginning on/around11/13/2023_? Yes No						

. ,				
mployer Address				
ity		State	Zip_	
hone Number		Website		
urrent Title				
tart / End Date	Hours worked per week			
Major Roles/Respons	ibilities:			
I. Educational H	istory			
I. Educational H	istory Name & Location	Graduate?/Degree?	Year Completed	Major/Subjec
		Graduate?/Degree?	Year Completed	Major/Subject of Study
High School College or		Graduate?/Degree?	Year Completed	
I. Educational H High School College or University Specialized Training, Trade School, etc.		Graduate?/Degree?	Year Completed	

nat are your futur achieve those goa	e professional pla ils?	ns and goals? F	low do you en	nvision the Ap	orenticeship Pi	rogram as helping
	you meet the eligand/or relevant in			nticeship, payi	ng particular a	ttention to your
,	.,	, , ,				
ase describe you opleting the Appi	areas of highest enticeship.	proficiency, spo	ecial skills or o	ther items tha	at may contribo	ute to your abilition

V. Application Checklist and Signatures

Attached/Enclosed:

- Professional Resume
- Copy of vaccination documentation
- If applicable, University Transcript or other verification of degree(s) awarded/to-be awarded
- At least two (2) letters of recommendation from an academic or professional reference

VI. <u>Applicant Signature</u>:

I certify that all information furnished by me in this application, and in any resume or other application materials I have supplied, is true, complete and correct to the best of my knowledge, and I authorize Choose Chicago to verify their accuracy and to obtain reference information on my work performance. I certify that I am at least 21 years of age or older. I agree that any false statement made by me, or my failure to answer completely any applicable questions may result in release from, or refusal of consideration to the Equity, Diversity & Inclusion Apprenticeship Program.

I understand that if an employment offer is extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. I understand that any employment offered is for a set duration according to the established dates of the Equity, Diversity & Inclusion Apprenticeship Program, and at will. Illinois is an "at-will" state which permits the employee or the employer to terminate the employment relationship at any time for any reason with or without notice. I further understand that any offer of employment will not include eligibility for any Employer offered benefits as part of employment. Nothing in this application should be construed to establish any rights beyond those expressly set forth herein, including any right to continuing employment upon the conclusion of the Equity, Diversity & Inclusion Apprenticeship Program.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard. If hired, I also grant permission for Choose Chicago to use my name and likeness in its publications.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Print Name	
Signature	Date
<u>NOTE</u>	

• SEND ALL MATERIALS:

By Email: resumes@choosechicago.com (Subject: 2023-2024 Apprenticeship Application)

- Apprentice will receive a stipend to support transportation/meal costs.
- Apprentice stipend value to be confirmed at later date by Human Resources department.