

APPLICATION FOR EMPLOYMENT

Please answer all questions. Resumes are not accepted in lieu of completion of this application. Note: This application was designed to use with several types of job positions. Some questions may not be completely applicable to the job position you are seeking; however, we ask that you answer all questions. An Equal Opportunity Employer. This application valid for only 60 days.

Last Name (Please Print)	First	Middle	Social Security Number		Date
Present Address: Street	City/State		Zip Code	Telephone Number	
Only U.S. citizens or alien ment, submit documentati	s who have a legal right to work i on verifying your legal right to wo	n the U.S. are ork in the U.S. a	eligible for emplo and your identity?	oyment. Can you ? 🗆 Yes 🕒 No	, upon employ-
Have you ever been convined as a conviction of the conviction of t	icted of a felony?	If Yes , give from employme	dates and expla ent.	in. (Attach separ	ate paper if
Are you over 18 years of a	age? 🗆 Yes 🗆 No				
EDUCATIONAL DATA					
School	Print Name, Number and Street, C and Zip Code for each Scho		No. of Yrs. Completed	Degree	Major Course of Study
High School					y = 11 - 1
College					
Graduate School					
Trade, Bus., Night, or Corres.					
Other					
Other skills: List any other	job-related skills or qualifications	that support yo	our application.		
Honors Received:					
In order to permit a check assumed name that you p	of your work and educational receives used? Yes No	ords, should we If Yes, identif	e be made aware y names and rel	e of any change evant dates.	of name or
Have you had prior educat If yes, describe:	ional experience which relates to	the job for whi	ch you are apply	ring? 🗆 Yes 🗆	l No
Are you a veteran of	the U.S. military Service? Yes	s Q No If Y	es, what branch	of Service?	
If Yes, beginning dat	te and ending date of active duty:	From	To:_		
Date of Discharge from	om Military Service:				

EMPLOYMENT EXPERIENCE

ALL FORMER JOBS (List most recent job first.) Account for all time periods including unemployment, self-employment and military service. (Attach separate paper(s), if necessary.)

Immediate Supervisor

Employer	Dates Employed (From/To)	Immediate Supervisor
Address		
Job Title	Hourly Rate/Salary (Starting/Final)	Telephone No.
Work Performed		
Reason for Leaving		
Employer	Dates Employed (From/To)	Immediate Supervisor
Address		
Job Title	Hourly Rate/Salary (Starting/Final)	Telephone No.
Work Performed		
Reason for Leaving		
Employer	Dates Employed (From/To)	Immediate Supervisor
Address		
Job Title	Hourly Rate/Salary (Starting/Final)	Telephone No.
Work Performed		
Reason for Leaving		
Employer	Dates Employed (From/To)	Immediate Supervisor
Address		
Job Title	Hourly Rate/Salary (Starting/Final)	Telephone No.
Work Performed		
Reason for Leaving		

Position for which you are applying	ng?				
Date available					
am seeking a position as: check all applicable)	I am seeking: (check all applicable)	Willing to work: (check all applic	able)		
Clerical	Full Time	-	able)		
		☐ Days			
Librarian	Part Time	☐ Evenings			
Department Head		Weekends			
Other	_	Overtime			
If hired, I understand that worki	ng hours and the job assignme				
o you have any friends or relative	res who work here? \(\sigma\) Yes \(\sigma\)) No			
lame	Relationship				
lame	Relatio	onshin			
ease identify any exceptions and	easons for not contacting prior	employers:			
	PROFESSIONAL RE	FERENCES:			
t three persons not related to yo	ou, whom you have known prof	essionally for at least o	one year.		
NAME	ADDRESS AND TE	LEPHONE	OCCUPATION		
			H		
			,		
t below any other information or	remarks that you wish to have o	considered as a part o	f your application for employmen		
ve you filed an application here b	pefore? □ Yes □ No If Yes	give date:			
ve you filed an application here b					

NOTICE TO APPLICANTS: The Bloomingdale Public Library complies with the Americans With Disabilities Act of 1990. During the interview process, you may be asked questions concerning your ability to perform job-related functions. If you are given a conditional offer of employment, you may be required to complete a post-job offer medical history questionnaire and/or undergo a medical examination. If required, all entering employees in the same job category will be subject to the same medical questionnaire and/or examination and all information will be kept confidential and in separate files.

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize the investigation of all matters contained in this application and hereby give the Bloomingdale Public Library permission to contact schools, previous employers, references, and others, and hereby release the Bloomingdale Public Library from any liability as a result of such contact. I understand that misrepresentations, omissions of facts or incomplete information requested in this application may remove me from further consideration for employment. In addition, if employed, any misrepresentations or omissions of facts called for in this application will be cause for dismissal at any time without any previous notice.

Applicants accepted for employment should clearly understand that while we make every effort to provide steady, continuous work, we have no employment contracts, and we cannot guarantee the permanence of any position. And of course, employees may elect to leave on their own accord to seek other jobs.

I understand that my employment with the Bloomingdale Public Library is for no specific term and may be terminated by me or the Library with or without notice or cause at any time. I further understand that no oral promise, policy, custom business practice or other procedure (including the Bloomingdale Public Library Human Resource Policy Manual or any personnel manuals) constitutes an employment contract or modification of the at-will employment relationship between me and the Bloomingdale Public Library.

The contents of personnel manuals, as well as other policies and practices, are subject to change or modification by the Bloomingdale Public Library, solely at its discretion, without notice. I also understand that no supervisor or other official of the Bloomingdale Public Library (except the Library Director, in writing) has the authority to enter into any agreement with me or to make any agreement contrary to the foregoing.

This application will remain active for sixty (60) days. Any applicant wishing to be considered for employment beyond sixty (60) days should reapply.

Signature	 Date			

The Bloomingdale Public Library is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, age, sex, religion, national origin, disability, marital status or any other characteristic protected by applicable law. We assure you that your opportunity for employment with the Bloomingdale Public Library depends solely upon your qualifications.