

APPLICATION FOR EMPLOYMENT

Algonquin Area Public Library District

Prospective employees will receive consideration without discrimination due to race, creed, color, sex, age national origin or handicap.

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Last Name _____ First _____ Middle _____

Street Address _____

City, State, Zip _____

Home Phone () _____ Business Phone () _____

Have you ever applied for employment with us? No Yes Date _____

Position Desired _____ Hours Per Week _____

Are you legally eligible for employment in the United States? _____

Special training/skills (languages, equipment, etc.) _____

Are you available evening and weekend hours? No Yes

When would you be able to begin work? _____ Pay expected _____

Have you ever been convicted of a felony or misdemeanor? No Yes

Are you 16 years of age or older? No Yes

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SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	YEARS COMPLETE	DID YOU GRADUATE	DEGREE/ DIPLOMA
College					
High					
Other					

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS
(Exclude those which may disclose your race, color, religion or national origin)

I authorize the Algonquin Area Public Library District to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation, school, credit agency or government agency to give the Algonquin Area Public Library District any information regarding me. In consideration of the Algonquin Area Public Library District's review of this application, I release the Algonquin Area Public Library District and all providers of information from any liability as a result of furnishing and receiving this information.

Signature _____ Date _____

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

<div style="border: 1px solid black; padding: 2px; display: inline-block; font-weight: bold; font-size: 1.2em;">1</div> Company Name _____ Address _____ Name of Supervisor _____ Job/Title Description _____	Telephone () - _____
	Employed <i>(Month and Year)</i>
	Weekly pay: Start _____ Last _____
	Reason for leaving:

<div style="border: 1px solid black; padding: 2px; display: inline-block; font-weight: bold; font-size: 1.2em;">2</div> Company Name _____ Address _____ Name of Supervisor _____ Job/Title Description _____	Telephone () - _____
	Employed <i>(Month and Year)</i>
	Weekly pay: Start _____ Last _____
	Reason for leaving:

<div style="border: 1px solid black; padding: 2px; display: inline-block; font-weight: bold; font-size: 1.2em;">3</div> Company Name _____ Address _____ Name of Supervisor _____ Job/Title Description _____	Telephone () - _____
	Employed <i>(Month and Year)</i>
	Weekly pay: Start _____ Last _____
	Reason for leaving:

<div style="border: 1px solid black; padding: 2px; display: inline-block; font-weight: bold; font-size: 1.2em;">4</div> Company Name _____ Address _____ Name of Supervisor _____ Job/Title Description _____	Telephone () - _____
	Employed <i>(Month and Year)</i>
	Weekly pay: Start _____ Last _____
	Reason for leaving:

Indicate employers you do **NOT** want us to contact:

Do Not Contact
 Employer Number(s) _____ Reason _____