



Date _____

Employment Application

Full Name _____

Address _____ Phone_(_____)_____

City _____, State _____ Zip_____

E-Mail Address _____

Position desired _____ Date you can begin work _____

Library branch in which you desire employment _____

Can you work the hours, including Saturdays and evenings, stated on the job description? Yes No

Are you legally authorized to accept employment in this country? _____(Proof of citizenship or immigration status will be required upon employment.)

Mark computer programs you use frequently:

Microsoft Word_____ Microsoft Excel_____ Internet Explorer_____ Email_____

Do you have any relatives working for Trails Regional Library? _____

Are you related to any member of the Library Board? If yes, give name and relationship

Formal Education

List your formal schooling: include academic, vocational, professional, or other training:

Personal References (not former employers or relatives)

Name	Occupation	Address	Phone Number

(Over)

Employment History

List below all present and past employment, beginning with the most recent.

Company _____ Telephone _____

Address _____

Date of employment _____ Can we contact Yes _____ No _____

Position held _____

Name of Supervisor _____

Reason for leaving _____

Description of duties _____

Company _____ Telephone _____

Address _____

Date of employment _____ Can we contact Yes _____ No _____

Position held _____

Name of Supervisor _____

Reason for leaving _____

Description of duties _____

Company _____ Telephone _____

Address _____

Date of employment _____ Can we contact Yes _____ No _____

Position held _____

Name of Supervisor _____

Reason for leaving _____

Description of duties _____

I hereby state that the information given by me in this application is true in all respects. I understand that if I am employed and the information is found to be false in any respect, I will be subject to dismissal without notice at any time. I hereby authorize the individuals listed as personal references to release any personal information that may pertain to my work habits or work performance. I understand and agree that if I am offered employment by Trails Regional Library, my employment will be for no definite term. I understand that my identity and employment eligibility to work in the United States will be verified. Employment at Trails Regional Library is subject to a successful criminal background check.

(Signed) _____ Date _____

IT IS THE POLICY OF TRAILS REGIONAL LIBRARY TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITIES
WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE OR HANDICAP.