

P E R S O N A L	FULL NAME (LAST NAME, FIRST):	DATE:
	STREET ADDRESS:	HOME TELEPHONE:
	CITY, STATE, AND ZIP:	CELL:
	POSITION DESIRED:	OTHER:
	ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES?	EMAIL ADDRESS:

Federal law requires that all employers verify the identity and employment eligibility of all new employees (including U.S. citizens). The library uses the E-Verify system established by the Department of Homeland Security (DHS) and the Social Security Administration (SSA).



E D U C A T I O N	SCHOOL	NAME AND LOCATION	COURSE OF STUDY	DID YOU GRADUATE?	DEGREE OR DIPLOMA
	HIGH SCHOOL				
	BUSINESS, TRADE, OR TECHNICAL				
	COLLEGE				
	GRADUATE LEVEL				

A V A I L A B I L I T Y		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	FROM:						
	TO:						
WHEN WILL YOU BE AVAILABLE TO BEGIN WORK?							

WORK HISTORY (LIST YOUR PRESENT OR MOST RECENT EMPLOYER FIRST.)

1	COMPANY NAME:	TELEPHONE:
	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:
2	COMPANY NAME:	TELEPHONE:
	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:
3	COMPANY NAME:	TELEPHONE:
	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:
4	COMPANY NAME:	TELEPHONE:
	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:

SKILLS

PROFICIENCIES	USE DAILY	USE OCCASIONALLY	HAVE NOT USED
KEYBOARDING	1	2	3
EMAIL	1	2	3
DATA ENTRY	1	2	3
INTERNET SEARCH ENGINES	1	2	3
MICROSOFT® WORD®	1	2	3
MICROSOFT® EXCEL®	1	2	3
GOOGLE DRIVE™	1	2	3

OTHER SKILLS OR QUALIFICATIONS

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS

REFERENCES (THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR)

NAME	TELEPHONE	BUSINESS

**S
I
G
N
A
T
U
R
E**

- **HAVE YOU READ AND UNDERSTOOD THE LISTING OF THE ESSENTIAL FUNCTIONS FOR THIS JOB? YES NO**
- **ARE YOU CAPABLE OF PERFORMING THE ESSENTIAL FUNCTIONS INVOLVED IN THIS JOB, WITH OR WITHOUT REASONABLE ACCOMMODATION? YES NO**

I CERTIFY THAT THE ABOVE STATEMENTS ARE CORRECT. I UNDERSTAND THAT ANY FALSE INFORMATION OR OMISSIONS IN THIS APPLICATION, OR ITS SUPPORTING DOCUMENTS, WILL BE SUFFICIENT GROUNDS FOR REFUSAL TO HIRE OR TERMINATION WITHOUT NOTICE. I UNDERSTAND THAT THE CHRISTIAN COUNTY LIBRARY HAS THE RIGHT TO REVIEW MY EDUCATION, PREVIOUS EMPLOYMENT AND OTHER BACKGROUND INFORMATION AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. I HEREBY UNDERSTAND THAT, UNLESS OTHERWISE DEFINED BY APPLICABLE LAW, ANY EMPLOYMENT RELATIONSHIP WITH THIS ORGANIZATION IS OF AN "AT WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE THE EMPLOYEE AT ANY TIME WITH OR WITHOUT CAUSE.

IF THE LIBRARY DECIDES TO ENGAGE AN INVESTIGATIVE CONSUMER REPORTING AGENCY TO PERFORM CUSTOMARY REFERENCE CHECKS, I AUTHORIZE THE LIBRARY TO DO SO. I RELEASE MY FORMER EMPLOYERS AND THE CHRISTIAN COUNTY LIBRARY FROM ANY LIABILITY INCURRED FROM INFORMATION OBTAINED.

APPLICANT'S SIGNATURE

DATE

NOTICE OF NONDISCRIMINATION: CHRISTIAN COUNTY LIBRARY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, ANCESTRY, SEX, AGE, DISABILITY, STATUS AS A DISABLED VETERAN OR VETERAN OF THE VIETNAM ERA OR OTHER PROTECTED STATUS.

**C
C
L

U
S
E

O
N
L
Y**