

APPLICATION FOR EMPLOYMENT

Bloomington Public Library

P E R S O N A L	Last Name	First	Middle	Preferred	Date	
	Street Address				Home Telephone ()	
	City, State, Zip				Cellular Telephone ()	
	Have you ever been employed by the Bloomington Public Library? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Dates/ Position(s) Held:				Email address	
	Position Desired				Pay Expected	
	Hours Desired <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Hours Available:				Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				When will you be available to begin work?	
	Do you have any relatives employed by the Bloomington Public Library? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain.					
	Other special training or skills (languages, machine operations, etc.)					

EMPLOYMENT HISTORY

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

1	Company Name _____ Address _____ Name of Supervisor _____ State Job Title and Describe Your Work _____	Telephone () _____ Employed (state Month and Year) From _____ To _____ Reason for Leaving:
2	Company Name _____ Address _____ Name of Supervisor _____ State Job Title and Describe Your Work _____	Telephone () _____ Employed (state Month and Year) From _____ To _____ Reason for Leaving:
3	Company Name _____ Address _____ Name of Supervisor _____ State Job Title and Describe Your Work _____	Telephone () _____ Employed (state Month and Year) From _____ To _____ Reason for Leaving:

Have you ever been terminated from a job? Yes No If yes, reason _____

We may contact the employers listed above unless you indicate those you do not want us to contact.
 DO NOT CONTACT Employer Number(s) _____ Reason _____

EDUCATION

Circle last year completed:

Elementary	5	6	7	8	
High School	1	2	3	4	
College	1	2	3	4	Major _____

Describe other education and training.

MILITARY

Did you serve in the U.S. Armed Forces?

Yes No

If yes, in what Branch? _____

Describe any training received relevant to the position for which you are applying.

REFERENCES

Name _____ Phone _____ Email _____

Name _____ Phone _____ Email _____

Name _____ Phone _____ Email _____

S I G N A T U R E	<p>The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.</p>
	<p>I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.</p> <p>_____ Date _____ Applicant's Signature</p>

Authorization for Background and Reference Check

I authorize the Bloomington Public Library to thoroughly investigate my references, work record, education, criminal conviction record and any other matters relevant to my suitability for employment. I also authorize my former employers to disclose to the Bloomington Public Library, or anyone acting on behalf of the Bloomington Public Library, any and all of my employment records, including my disciplinary reports and letters of reprimand, without giving me notice of such disclosure. I hereby fully release and discharge the Bloomington Public Library, my former employers, their respective officers, employees, and agents, and all other persons and entities from any and all claims, demands, and liabilities arising out of or in any way relating to such investigation or disclosure.

_____ Date

_____ Applicant's Signature

Equal Opportunity Employer

Prospective employees will receive consideration without discrimination because of gender, race, ethnicity, national origin, religion, age, marital status, disability, sexual orientation, veteran status, or any other category protected by local, state, or federal law.

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