

CAMPBELL COUNTY PUBLIC LIBRARY SYSTEM
2101 S. 4-J Road • Gillette • WY • 82718 • 307-687-0009
APPLICATION FOR EMPLOYMENT
 An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, or disability.
 It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE TYPE OR PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job related information.

Job applied for _____ Today's Date _____

Are you seeking: Full-time Part-time Days and Hours available? _____ When could you start work? _____

Name _____ Telephone # _____

Address _____

Are you 18 years of age or older? Yes No (If you are hired, you may be required to submit proof of age.)

Social Security # (Optional) _____
 (Proof of U.S. citizenship or immigration status will be required upon employment.)

Have you ever applied here before? Yes No If yes, when? _____

Were you ever employed here? Yes No If yes, when? _____

Have you ever been convicted of any law violation? Yes No (Include any plea of "guilty" or "no contest." Exclude minor traffic violations. A conviction will not necessarily disqualify an applicant for employment.)

If yes, give details _____

Are you now or do you expect to be engaged in any other business or employment? Yes No If yes, please explain _____

For driving jobs only: Do you have a valid driver's license? Yes No Driver's License Number _____

List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability or other protected status.) _____

EDUCATIONAL BACKGROUND - LIST NAME AND ADDRESS OF SCHOOLS

(Circle highest level completed)

Grammar school	5	6	7	8
High school	9	10	11	12
College	1	2	3	4
Graduate school	1	2	3	4

High School or GED _____

College or University _____

Graduate School _____

Vocational or Technical _____

What skills do you have that relate to the job for which you are applying? _____

What machines or equipment can you operate that relate to the job for which you are applying? _____

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers.

Name of Employer	Job Title and Duties		
Address			
City, State, Zip Code	Dates of Employment	From	To
Supervisor	Telephone	Pay: Start \$	Final \$ Reason For Leaving
Name of Employer	Job Title and Duties		
Address			
City, State, Zip Code	Dates of Employment	From	To
Supervisor	Telephone	Pay: Start \$	Final \$ Reason For Leaving
Name of Employer	Job Title and Duties		
Address			
City, State, Zip Code	Dates of Employment	From	To
Supervisor	Telephone	Pay: Start \$	Final \$ Reason For Leaving
Name of Employer	Job Title and Duties		
Address			
City, State, Zip Code	Dates of Employment	From	To
Supervisor	Telephone	Pay: Start \$	Final \$ Reason For Leaving

Have you worked or attended school under any other name? Yes No If yes, give names:

Are you presently employed? Yes No If yes, whom do you suggest we contact?

Have you ever been fired from a job or asked to resign? Yes No If yes, please explain:

Give three references, not relatives or former employers.

Name	Address	Phone
1.		
2.		
3.		

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in dismissal if discovered at a later date.

I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics, and mode of living obtained from interviews with neighbors, friends, former employers, schools and others. I understand I have a right to make a written request within a reasonable time of the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from legal liability in making such statements.

I understand that if I am extended an offer of employment it may be conditional upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand I may be required to successfully pass a drug screening exam. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature _____ Date _____