

Application for Employment
San Miguel County Public Library District #1

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. 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 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 Temporary employment?

When could you start work? _____

Last Name	First Name	Middle Name	Telephone Number	
Present Mailing Address		City	State	Zip Code
Are you 18 years of age or older?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
(If you are hired, you may be required to submit proof of age.)				
Social Security # (optional) _____				
If hired, can you furnish proof you are eligible to work in the U.S.?			Yes <input type="checkbox"/>	No <input type="checkbox"/>

Have you ever applied here before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, when? _____
Have you ever been convicted of any law violation? Include any plea of "guilty" or "no contest." Exclude minor traffic violations.....			
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, give details _____			
(A conviction will not necessarily disqualify an applicant for employment.)			
If employed, do you expect to be engaged in any additional business or employment outside of our job?			
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, give details _____			

EDUCATION

List Name and Address of Schools

High School or GED: _____

Number of
Years
Completed

Diploma/
Degree/
Certificate

College or University: _____

Subjects Studied: _____

Vocational or Technical: _____

Subjects Studied: _____

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying?

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

REFERENCES

Have you worked or attended school under any other names? 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, who can attest to your ability to perform this job.

Name	Address	Phone	Relationship

AFFIDAVIT, CONSENT AND RELEASE
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 my dismissal if discovered at a later date.

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 any legal liability in making such statements.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE BOARD OF TRUSTEES OF THE DISTRICT HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

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

Signature: _____ Date: _____

This application for employment will remain active for a limited time.
Ask the organization's representative for details.