



WARREN-NEWPORT PUBLIC LIBRARY DISTRICT

Application for Employment EQUAL OPPORTUNITY EMPLOYER

Personal Data

Name (last, first, middle) _____ Date _____

Address _____

City _____ State _____ Zip Code _____

Phone () _____ E-Mail _____

If employed, can you provide proof of authorization to work in the U.S.? Yes No

Position(s) applying for: _____

Employment Desired: Full Time Part Time Available Start Date: _____

Do you have any relatives or friends currently working for the Library or serving on the Library Board?
If yes, give name and relationship:

Education Record

High School

Address _____

Did you graduate? Yes No

Undergraduate School, Trade or Technical Training

Address _____

Did you graduate? Yes No Degree: _____

Graduate School

Address _____

Did you graduate? Yes No Degree: _____



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Special Skills

Summarize any special skills or qualifications that you acquired through employment or other experience that are applicable to the job that you are applying for.

Computer Skills

List all the computer skills you have:

Employment History

Begin with most recent employer. Attach additional sheet if needed.

1. Employer	Dates of Employment
Address	
Phone ()	Manager's Name
Title/Duties	
Reason for Leaving	

2. Employer	Dates of Employment
Address	
Phone ()	Manager's Name
Title/Duties	
Reason for Leaving	

3. Employer	Dates of Employment
Address	
Phone ()	Manager's Name
Title/Duties	
Reason for Leaving	



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Have you been employed here before? Yes No

May we contact your current employer? Yes No

Professional References Give the names of three persons not related to you, whom you have known at least three (3) years in a professional capacity. Prior managers or supervisors preferred.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Applicant's Signature

I certify that all of my answers given here are true and complete to the best of my knowledge, and that supplying false information herein shall result in immediate disqualification for consideration for employment or termination from employment, regardless of when such false information is discovered. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision; and I hereby agree to indemnify and hold harmless each and every current or prior employer in defending against any charge, complaint or suit filed with any Federal, State or local agency, or in any court of the State or Federal government for providing an accurate, factual history of employment information. I understand that neither this document nor any offer of employment from the employer constitutes an employment contract, unless a specific document to that effect is executed by the employer and employee in writing.

Signature of Applicant

Date