

## BOONE COUNTY PUBLIC LIBRARY DISTRICT APPLICATION FOR EMPLOYMENT

*Boone County Public Library is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.*

### PERSONAL INFORMATION

NAME [please print] \_\_\_\_\_  
Last First M. I.

ADDRESS \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

AGE [if under 18] \_\_\_\_\_

### EMPLOYMENT DESIRED

POSITION APPLYING FOR \_\_\_\_\_

**LOCATION**

- MAIN LIBRARY
- SCHEBEN BRANCH
- FLORENCE BRANCH
- LENTS BRANCH
- WALTON BRANCH
- ANY

**HOURS**

- FULL TIME
- PART TIME
- DAY
- NIGHT
- WEEKEND
- ANY

SALARY  
REQUIRED \_\_\_\_\_

DATE  
AVAILABLE \_\_\_\_\_

### EDUCATION

HIGH SCHOOL DIPLOMA/GED \_\_\_\_\_ YES \_\_\_\_\_ NO If NO, years of schooling completed \_\_\_\_\_

COLLEGE DEGREE \_\_\_\_\_ YES Name of degree \_\_\_\_\_  
\_\_\_\_\_ NO Years of schooling completed \_\_\_\_\_

POSTGRADUATE DEGREE \_\_\_\_\_ YES Name of degree \_\_\_\_\_  
\_\_\_\_\_ NO Years of schooling completed \_\_\_\_\_

<b>EMPLOYMENT HISTORY</b>
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List below your last three [3] places of employment, most recent one first:

Dates	Employer	Phone #	City	State
Position [s]			Reason for leaving	

Dates	Employer	Phone #	City	State
Position [s]			Reason for leaving	

Dates	Employer	Phone #	City	State
Position [s]			Reason for leaving	

Please describe any specialized education, training, or job skills including computer experience:

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<b>APPLICANT'S STATEMENT</b>
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Have you ever been convicted of a criminal offense (felony or misdemeanor)? \_\_\_ Yes or \_\_\_ No  
 If yes, please describe the crime – state nature of the crime(s), when and where convicted and disposition of the case

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand and acknowledge 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. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge.

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 Signature

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 Date