

CITY OF EAGLE - EAGLE PUBLIC LIBRARY

Application for Employment

An Equal Opportunity Employer

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application blank. **PLEASE PRINT**, except for signature on back of Application. All information given will be available only to persons who have a "need to know" or as required by law. This company will make reasonable accommodation in the application process, if needed.

This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.

NAME (Print) _____ TODAY'S DATE _____
Last First Initial

PRESENT ADDRESS _____ TEL. NO. _____
No. Street City State Zip Day Evening

Position applied for? _____ When are you available for employment? _____

Which type of employment are you seeking: Full-time _____ Part-time _____ Temporary or Summer _____

RECORD OF EMPLOYMENT

1. Name of Current/Most Recent Employer		Address		Telephone	Type of Business
Dates Employed		Rate of Pay		Reason for Leaving	Supervisor's Name and Title
From	To	Starting	Ending		
Mo. Yr.	Mo. Yr.				
List the jobs you held, duties performed, skills used or learned, advancements or promotions.					

May we contact your current employer? Yes _____ No _____

2. Name of Next Previous Employer		Address		Telephone	Type of Business
Dates Employed		Rate of Pay		Reason for Leaving	Supervisor's Name and Title
From	To	Starting	Ending		
Mo. Yr.	Mo. Yr.				
List the jobs you held, duties performed, skills used or learned, advancements or promotions.					

3. Name of Next Previous Employer		Address		Telephone	Type of Business
Dates Employed		Rate of Pay		Reason for Leaving	Supervisor's Name and Title
From	To	Starting	Ending		
Mo. Yr.	Mo. Yr.				
List the jobs you held, duties performed, skills used or learned, advancements or promotions.					

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4. Name of Next Previous Employer		Address		Telephone	Type of Business
Dates Employed		Rate of Pay		Reason for Leaving	Supervisor's Name and Title
From	To	Starting	Ending		
Mo.	Yr.	Mo.	Yr.		
List the jobs you held, duties performed, skills used or learned, advancements or promotions.					

Have you ever been convicted of a criminal offense? Yes No (A conviction will not necessarily disqualify an applicant.)
 If yes, please explain: _____

Are you over 18 years of age? Yes No

Are you authorized to work in the United States? Yes No
 (Federal Law requires proof of identity and employment authorization for all new employees.)

Name of any relative employed by the City of Eagle: _____

Were you previously employed by the City of Eagle? _____ If yes, when? _____

Do you have a valid driver's license? Yes No License Number and State Issued: _____

EDUCATION (Circle last year completed)

- Elementary & Jr. High 5 6 7 8
- High School 1 2 3 4
- College 1 2 3 4
- Other job-related education

SCHOOL NAME

MAJOR SUBJECTS

_____ Not Applicable

Indicate office skills you have and office machines and equipment you can operate:

Other job related skills:

This Employment Application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and, as applicable, information concerning my employment, education, general reputation, character, personal characteristics, and habits, and that such information may be developed through personal interviews with third parties such as family members, neighbors, friends, associates, former employers, educational institutions, custodians of official records or other sources. Only job-related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I authorize the Company to release to any person, firm, entity or organization with which I may seek employment in the future, any truthful information concerning my work experience with the Company. I hereby release and hold the Company harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand the City/Library may require pre-employment screening and practices designed to prevent hiring individuals who use illegal drugs. A drug testing consent form is required for all applicants.

I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without consequential omissions, and understand that, if employed, omissions and/or false statements on this application or during any interviews may result in dismissal. **I understand and acknowledge that, if hired, my employment is for no definite period and either the Employer or I may terminate our relationship at will at any time, without notice or any reason, and that this employment application does not constitute an employment contract.** I have had an opportunity to have my questions about this statement's content and intent answered and understand its terms.

Date

Signature of Applicant