

THE ELIZABETH PUBLIC LIBRARY
11 SOUTH BROAD ST.
ELIZABETH, NJ 07202
908-354-6060

APPLICATION FOR EMPLOYMENT

Instructions: Please enter your information. Answer all relevant and marked questions. Put N/A for answers you must leave blank.

DATE: _____

NAME: _____

ADDRESS: _____

CITY, STATE, & ZIP CODE: _____

DAYTIME PHONE NUMBER: _____

EVENING PHONE NUMBER: _____

ARE YOU ELIGIBLE FOR PERMANENT EMPLOYMENT IN THE U.S.? _____

ARE YOU 18 YEARS OLD OR OLDER? _____

(If you are under 18, you will be required to submit working papers if offered employment.)

IF NO, PLEASE LIST YOUR CURRENT AGE: _____

ARE YOU A VETERAN OF A BRANCH OF THE US MILITARY? _____

WHAT TYPE OF MILITARY DISCHARGE DO YOU HAVE? _____

HAVE YOU EVER BEEN FIRED FROM A POSITION? _____

(If the answer is yes, please give the dates and the reasons for each dismissal in the "Comment" section at the end of this application.)

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____

EMPLOYMENT EXPERIENCE

POSITION APPLIED FOR: _____

HOW DO YOU WANT TO WORK: _____

DAYS AVAILABLE (check all that apply):

Monday____ Tuesday____ Wednesday____ Thursday____ Friday____ Saturday____

HOURS AVAILABLE: _____

DATE AVAILABLE TO START: _____

UPLOAD YOUR RESUME: _____

OR

ENTER EMPLOYMENT INFORMATION HERE:

NAME & ADDRESS OF EMPLOYER: _____

PHONE NUMBER: _____ JOB TITLE: _____

HIGHEST SALARY: _____ EMPLOYED FROM: _____ TO: _____

REASON FOR LEAVING: _____

DESCRIBE THE TYPE/KIND OF WORK PERFORMED: _____

MAY WE CONTACT? _____

NAME & ADDRESS OF EMPLOYER: _____

PHONE NUMBER: _____ JOB TITLE: _____

HIGHEST SALARY: _____ EMPLOYED FROM: _____ TO: _____

REASON FOR LEAVING: _____

DESCRIBE THE TYPE/KIND OF WORK PERFORMED: _____

MAY WE CONTACT? _____

NAME & ADDRESS OF EMPLOYER: _____

PHONE NUMBER: _____ JOB TITLE: _____

HIGHEST SALARY: _____ EMPLOYED FROM: _____ TO: _____

REASON FOR LEAVING: _____

DESCRIBE THE TYPE/KIND OF WORK PERFORMED: _____

MAY WE CONTACT? _____

EDUCATION

HIGH SCHOOL ATTENDED: _____

DID YOU GRADUATE: _____

GED: _____

OTHER SCHOOL: _____

DID YOU GRADUATE: _____

COLLEGE OR UNIVERSITY ATTENDED: _____

DID YOU GRADUATE: _____

LIST ANY SPECIAL SKILLS OR OFFICE MACHINES OPERATED, ETC.

REFERENCES

(Please List Three)

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

COMMENTS

CERTIFICATION AND CONSENT AGREEMENT

I CERTIFY THAT THE STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND ARE MADE IN GOOD FAITH.

SIGNATURE: _____ **DATE:** _____

I CONSENT TO THE RELEASE OF INFORMATION CONCERNING MY PAST EMPLOYMENT AND EDUCATIONAL BACKGROUND BY EMPLOYERS, SCHOOLS, AND INDIVIDUALS TO THE HIRING OFFICIAL AT THE ELIZABETH PUBLIC LIBRARY.

SIGNATURE: _____ **DATE:** _____