

FOR EMPLOYER USE ONLY

LAST NAME

DATE SUBMITTED

Pewaukee Public Library

210 Main Street
Pewaukee, WI 53072

APPLICATION OF EMPLOYMENT

(Applications held for six months)

This company is an equal opportunity employer. Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, religion, age, sex, handicap, ancestry, arrest or conviction record or status within any other protected group as prohibited by law or regulation.

READ INSTRUCTIONS CAREFULLY BEFORE ANSWERING QUESTIONS. Print or type your name. Answer all other questions in ink or typing. False statements will be cause for rejection. The application must be completely filled out and returned / mailed before the expiration of the period prescribed for filing applications in the public notice. The Pewaukee Public Library reserves the right to require any applicant hired to submit additional necessary information.

I hereby make application for employment for the position of _____

PERSONAL INFORMATION

NAME: _____
(Last) (First) (Middle)

ADDRESS: _____
(Street) (City / State / Zip) (County)

PHONE: _____ Are you over 18 years old? Yes ☐ No ☐
(Home) (Cell)

EMAIL ADDRESS: _____

Are you legally authorized to work in the U.S.? Yes ☐ No ☐

NOTE: You must furnish documents to verify your identity and eligibility for employment accordance with the Immigration Reform and Control Act of 1986.

Do you currently have a pending criminal case against you and/or have you ever been convicted of a felony?

Yes ☐ No ☐ If yes, please explain:

EDUCATION

SCHOOLS ATTENDED	NAME / LOCATION	Degree Completed & Year
High School		
College		
Post Graduate		
Correspondence, Night School, GED, Trade School, Other		

REFERENCES (3)

NAME	ADDRESS/TELEPHONE	OCCUPATION

EMPLOYMENT HISTORY

Current Employer: _____ Current Job Title: _____

What is your present salary or hourly rate? _____ Are you willing to have us consult your present employer about your work? Yes ☐ No ☐Have you ever been discharged or requested to resign from a position? Yes ☐ No ☐ If yes, please explain:

Give an account of your employment experience during the past five years. DO NOT LIST “odd job” at which you were employed only a few days. (include current job)

JOB TITLE	EMPLOYER NAME/ADDRESS/TELEPHONE	FROM	TO

State any special qualifications that are applicable to the position you are applying for:

APPLICANT'S STATEMENT

By signing below, I certify that answers give by me to the foregoing questions and statements are true and correct to the best of my knowledge and without misrepresentation or omissions of any kind. I further understand that the making of any false or misleading statement or willful omission on the Application for Employment, or any other document, may be used to deny me employment, or if employed, used for discipline, up to and including termination. I agree that the Pewaukee Public Library shall not be held liable in any respect if my employment is terminated because of false statements, answers, or omissions made by applicant on this Application for Employment or any other document.

I, hereby, grant permission to the Pewaukee Public Library to investigate any of the information included in this Application. I, also, authorize the companies, schools, governmental agencies or persons named above to give any information, transcripts, records, or documents requested regarding my work experience, educational background, conviction record, character or qualifications, personal or otherwise. I, hereby, release the Pewaukee Public Library as well as said companies, schools, governmental agencies or persons from all liability for any damage that may result from the furnishing to and receiving of this information by the Pewaukee Public Library. In addition, I recognize that a copy of this authorization and release is as valid as the original and should be considered as such.

I, also, understand that I may be required to undergo a post-conditional employment offer background check and drug/alcohol screen and hereby authorize the release of those results to the Pewaukee Public Library. I understand that I may be required to undergo future such examinations and tests and that my employment is contingent upon successful completion of such tests. I understand and release the Pewaukee Public Library from any and all liability with respect to such examinations and tests, and hold the Pewaukee Public Library harmless for any decision made by the Pewaukee Public Library in this respect.

I understand that if employed, I must furnish documents to verify my identity and eligibility for employment in the United States in accordance with the Immigration Reform and Control Act of 1986.

I agree to conform to the rules, regulations and policies of the Pewaukee Public Library. I fully understand and agree that filling out this Application for Employment does not obligate the Pewaukee Public Library to offer me a job, nor does it obligate me to accept a job with the Pewaukee Public Library.

SIGNATURE OF APPLICANT: _____ **DATE:** _____