



SILVER FALLS LIBRARY DISTRICT EMPLOYMENT APPLICATION

EQUAL EMPLOYMENT OPPORTUNITY: All qualified persons will be considered for employment without regard to race, color, religion, sex, national origin, age, political affiliation, handicap status, or any other nonmerit factor.

If hired, you will be required to submit identification in accordance with Immigration and Naturalization Service requirements.

All portions of this application must be completed. Incomplete applications will not be considered for employment. Please type or print in ink.

Name Last	First	MI	Date of Application	Home Phone
Address		City	State	Zip
Work phone:			May we contact you at work? <input type="checkbox"/> YES <input type="checkbox"/> NO	Other Phone
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Do you have the legal right to work in the U.S.?		
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Are you under 18 years of age?		
Have you ever used another name which would affect employment and education reference verification? If yes, give name(s) and dates used.				
State any limitations to your working schedule.				

Name of position desired:	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	Date available for work
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REFERENCES

List three persons other than former employers and relatives having knowledge of your character, experience, or ability.

Name:	Time Known:	Occupation:
Address:		Phone:
Name:	Time Known:	Occupation:
Address:		Phone:
Name:	Time Known:	Occupation:
Address:		Phone:

EDUCATION

Circle last grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College 13 14 15 16 17 18 19 20

Do you have a high school diploma or equivalency? NO YES _____

School Name & Location

List all schools attended beyond high school and their location	Date Attended From To	Diploma or Degree	Subject or Major

Please rate your computer skills: NOVICE 1 2 3 4 5 EXPERT

What computer programs can you operate?

List any school course or vocational training, licenses, certifications, or other qualifications which bear on your suitability for this position:

EMPLOYMENT HISTORY (next page)

Please complete the attached employment history section even if you attach a resume.

CERTIFICATION and RELEASE of INFORMATION

I understand that consideration for employment is contingent on the results of a reference and background check. I authorize the Silver Falls Library District to investigate the truthfulness of all statements made on this application and to contact my former employers, other listed references, or any other persons who can verify information. I further authorize the Silver Falls Library District to discuss the results of any investigation with all of their employees who are involved in the hiring process. I further authorize all contacted persons and former employees to provide information concerning this application, my background and suitability for employment and I release each such persons and former employers from liability for providing such information.

Signature _____
Date _____

I certify that the information contained in this application is correct to the best of my knowledge, and understand that falsification and/or omissions in any detail is grounds for disqualification from consideration for employment or if hired, for dismissal from employment.

Signature _____
Date _____

YOUR NAME _____

EMPLOYMENT HISTORY

Please complete this section even if you attach a resume. List your work experience, most recent first, including all relevant employment in your work history. Please include any military service, volunteer work, or unemployment which might account for gaps in your work history. If needed include additional sheets of Employment History.

Employer	Immediate Supervisor and Title	May we contact for reference?
Address		Phone ()
Job Title	From: Mo ___ Yr ___ Full-Time Part-Time To: Mo ___ Yr ___ If Part-Time, # of hrs/wk ___	
Description of job duties:		
Reason for leaving:		

Employer	Immediate Supervisor and Title	May we contact for reference?
Address		Phone ()
Job Title	From: Mo ___ Yr ___ Full-Time Part-Time To: Mo ___ Yr ___ If Part-Time, # of hrs/wk ___	
Description of job duties:		
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Description of job duties:		
Reason for leaving:		

YOUR NAME _____

EMPLOYMENT HISTORY continued

Employer	Immediate Supervisor and Title	May we contact for reference?
Address		Phone ()
Job Title	From: Mo ___ Yr ___ Full-Time Part-Time To: Mo ___ Yr ___ If Part-Time, # of hrs/wk ___	
Description of job duties:		
Reason for leaving:		

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