

Wheaton Public Library Application for Employment

EQUAL EMPLOYMENT OPPORTUNITY STATEMENTIt is the express policy of the Wheaton Public Library to consider all applicants for WPL employment without regard to race, color, religion, gender, age, physical disability, political affiliation, or National origin (except where a bona fide occupational qualification exists).

Applicant Information

oday's D	ate:	Applying for: Full ⁻	Γime Part Τ	-ime
osition A	pplying for:			
ull Name	: Last	First		M.I.
ddress:	Street Address			Apartment/Unit #
	City		State	ZIP Code
hone:		Emai	l:	
ate Avail	able:			
an you p	rovide proof of authorizatio	n to work in the United States?	YES NO	
ave vou	ever worked for the Library	YES NO?	n?	

Education, Training and Experience

High School:				Address:	
Did you graduate?	YES	NO	Diploma: _		
College:				Address:	
Did you graduate?	YES	NO	Degree: _		
Other:				Address:	
Did you graduate?	YES	NO	Degree:		
			Pro	ofessional Re	ferences_
Please list three pro	ofessior	nal refere	ences.		
Name:					_ Business Relationship:
Company:					_ Phone:
Address:					
*****	*****	******	*******	******	******************
Name:					Business Relationship:
Company:					Phone:
Address:					
********	*****	*****	******	********	***************************************
Name:					Business Relationship:
Company:					Phone:
Address:					

Previous Employment

Company:		Phone:	
Address:		Supervisor:	
Job Title:		From:	To:
Responsibilities:			
Reason for leaving:			
May we contact your previous employer for a reference?	YES		*******
Company:			
Address:		Supervisor:	
Job Title:		From:	To:
Responsibilities:			
Reason for leaving:			
May we contact your previous employer for a reference?	YES	NO	******
Company:		Phone:	
Address:		Supervisor:	
Job Title:		From:	To:
Responsibilities:			
Reason for leaving:			
May we contact your previous employer for a reference?	YES	NO	

Applicant's Statement

I certify that 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 also authorize the Police Department to furnish all information regarding any conviction listed under my name and release them from all liabilities whatsoever for furnishing any information concerning me. I understand that a post-offer medical examination, including a drug screen, may be required for this position. I further understand that any offer of employment or granting of employment made by the Wheaton Public Library may be withdrawn or I may be discharged by the Wheaton Public Library's Director of Human Resources in his/hers sole discretion, with or without cause, at any time should the Director of Human Resources determine that the withdrawal of the offer or dismissal is in his/her opinion in the best interests of the Wheaton Public Library. In consideration of the Wheaton Public Library reviewing and investigating this application, I hereby waive, to the greatest extent permitted by law, any and all suits, claims, actions or demands in law, chancery or administrative proceeding and damages, costs, expenses, lost wages, lost income or lost opportunities which may result from the Wheaton Public Library's withdrawal of any offer of employment.

This application for employment shall be considered active for a period of time not to exceed 1 year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

The applicant understands that neither this document, nor the Wheaton Public Library Employee Manual, nor any offer of employment from the employer constitute an employment contract unless a specific document to that effect is executed by the employer and employee in writing.

In the event of employment, I understand that false and misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

Date

Signature of Applicant

I HAVE READ THIS APPLICANT'S STATEMENT AND AGREE TO BE BOUND BY ITS TERMS & CONDITIONS.