

# A P P L I C A T I O N F O R E M P L O Y M E N T



**HAYNER PUBLIC LIBRARY DISTRICT**  
**401 STATE STREET • ALTON, IL 62002**

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation of the application and/or interview process should notify a representative to the Human Resources Department.

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Telephone # (\_\_\_\_) \_\_\_\_\_ Mobile/Beeper/Other Phone # (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

**These documents will be required upon acceptance of employment:**

SS # \_\_\_\_\_ D.L. #/State I.D. # \_\_\_\_\_ State \_\_\_\_\_

Have you ever been employed by an Illinois Municipal Retirement Fund employer? Yes\_\_\_ No\_\_\_

If you are under 18, and it is required, can you furnish a work permit? Yes\_\_\_ No\_\_\_

If no, please explain \_\_\_\_\_

Have you ever been employed here before? If yes, give dates and positions \_\_\_\_\_ Yes\_\_\_ No\_\_\_

Are you legally eligible for employment in this country? Yes\_\_\_ No\_\_\_

Date available for work \_\_\_\_\_ What is your desired salary range? \$ \_\_\_\_\_

Type of employment desired \_\_\_\_\_ Full Time \_\_\_\_\_ Part-Time

Are you able to meet the attendance requirements of the position? Yes\_\_\_ No\_\_\_

## EMPLOYMENT HISTORY

Provide the following information of your past four (4) employers, assignments or volunteer activities, starting with the most recent.

FROM	TO	EMPLOYER	TELEPHONE #
STARTING JOB TITLE/FINAL JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT FOR REFERENCE?			
YES NO LATER			
REASON FOR LEAVING		HOURLY RATE/SALARY	
		START \$	PER FINAL \$ PER
FROM	TO	EMPLOYER	TELEPHONE #
STARTING JOB TITLE/FINAL JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT FOR REFERENCE?			
YES NO LATER			
REASON FOR LEAVING		HOURLY RATE/SALARY	
		START \$	PER FINAL \$ PER
FROM	TO	EMPLOYER	TELEPHONE #
STARTING JOB TITLE/FINAL JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT FOR REFERENCE?			
YES NO LATER			
REASON FOR LEAVING		HOURLY RATE/SALARY	
		START \$	PER FINAL \$ PER
FROM	TO	EMPLOYER	TELEPHONE #
STARTING JOB TITLE/FINAL JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT FOR REFERENCE?			
YES NO LATER			
REASON FOR LEAVING		HOURLY RATE/SALARY	
		START \$	PER FINAL \$ PER

**AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER**

---

**SKILLS AND QUALIFICATIONS**

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

---

---

---

---

---

---

---

---

---

**EDUCATIONAL BACKGROUND** (ATTACH ADDITIONAL PAGE IF NECESSARY)

NAME AND LOCATION	NO. OF YRS. COMPLETED	DID YOU GRADUATE?	DEGREE/COURSE OF STUDY
HIGH SCHOOL			
COLLEGE			
OTHER			

---

**REFERENCES** (IN ADDITION TO THOSE LISTED UNDER "EMPLOYMENT HISTORY")

NAME	TELEPHONE	NO. OF YRS. KNOWN
	( )	
	( )	
	( )	

---

**APPLICANT STATEMENT**

I certify that all information I have provided in order to apply for and secure work with the Hayner Public Library District is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer’s service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, altering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal laws.

I understand that this application remains current for a period of one year. At the conclusion of this period, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to complete a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with a minimum of two weeks notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period of definite duration. I understand that no supervisor or representative or the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the library director.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

Permission is granted to The Hayner Public Library District or an investigative reporting agency retained by Hayner to verify statements made on this application or any other pre-employment document and to report on my employment and personal history, and I release all parties from all liability for any damage that may result from furnishing such information.

Permission granted by this statement shall include, but is not limited to, drug and/or alcohol testing, subject to expenses being paid by The Hayner Public Library District.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_