GREENTOWN PUBLIC LIBRARY

421 S. Harrison St. – Greentown, IN 46936

765.628.3534 (voice) – 765.628.3759 (fax)

APPLICATION FOR AT-WILL EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, marital or veteran status, disability or any other legally-protected status.

*(PLEASE PRINT)*

|  |  |
| --- | --- |
| Position Applied For | Date of Application |
| How Did You Learn About Us?  ❑ Advertisement ❑ Friend ❑ Walk-In  ❑ Employment Agency ❑ Relative ❑ Other | |

|  |  |
| --- | --- |
| Last Name First Name Middle Name | |
| Address Number Street City, State ZIP | |
| Telephone Number(s) | Social Security No |

If you are under 18 years of age, can you provide required   
proof of your eligibility to work? ❑ Yes ❑ No

Have you ever filed an application with us? ❑ Yes ❑ No

If yes, give date

Have you ever been employed with us? ❑ Yes ❑ No

If yes, give date

Are you currently employed? ❑ Yes ❑ No

May we contact your present employer? ❑ Yes ❑ No

Are you prevented from lawfully becoming employed in this  
country because of Visa or Immigration Status? ❑ Yes ❑ No

*Proof of citizenship or immigration status will be required upon employment.*

On what date are you available to begin work?

Are you available to work ❑ Full Time ❑ Part Time ❑ Shift Work ❑ Temporary

Are you currently on “lay off” status and subject to recall? ❑ Yes ❑ No

Can you travel if required? ❑ Yes ❑ No

Have you been convicted of a crime within the last seven years? ❑ Yes ❑ No

*Conviction will not necessarily disqualify an applicant from employment*

If yes, please explain:

**This application will remain active for 180 days.**

**\*WE ARE AN AT-WILL, EQUAL OPPORTUNITY EMPLOYER\***

**Education**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name and Address of School | Course of Study | Years Completed | Diploma/Degree |
| Elementary School |  |  |  |  |
| High School |  |  |  |  |
| Undergraduate College |  |  |  |  |
| Graduate  Professional |  |  |  |  |
| Other (Specify) |  |  |  |  |

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

**Employment Experience**

Start with your present or last job. Include any job-related military service, assignments and volunteer activities. Please exclude organizations that indicate race, religion, gender, disabilities or any other protected status.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Employer | | | Dates Employed | | | Work Performed | |
| From | To | |
| Address | | | | | | | |
| Telephone Number(s) | | | | | | | |
| Job Title | | Supervisor | | | Starting | | Final |
| Reason for Leaving | | | | | | | |
| Employer | | Dates Employed | | | Work Performed | |
| From | To | |
| Address | | | | | | |
| Telephone Number(s) | | | | | | |
| Job Title | Supervisor | | | Starting | |
| Reason for Leaving | | | | | | |
| Employer | | Dates Employed | | | Work Performed | |
| From | To | |
| Address | | | | | | |
| Telephone Number(s) | | | | | | |
| Job Title | Supervisor | | | Starting | |
| Reason for Leaving | | | | | | |
| Employer | | Dates Employed | | | Work Performed | |
| From | To | |
| Address | | | | | | |
| Telephone Number(s) | | | | | | |
| Job Title | Supervisor | | | Starting | |
| Reason for Leaving | | | | | | |

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business and civic activities and offices held.

*Please exclude memberships that would reveal gender, race, religion, national origin, age, ancestry, disability or any other protected status.*

**Additional Information**

Other Qualifications

*Summarize special job-related skills and qualifications acquired from employment or other experience.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**State any additional information you feel may be helpful to us in considering your application.**

**\* WE ARE AN AT-WILL, EQUAL OPPORTUNITY EMPLOYER\***

**References**

(Name) (Relationship) (Phone)

(Address)

(Name) (Relationship) (Phone)

(Address)

(Name) (Relationship) (Phone)

(Address)

**FOR PERSONNEL DEPARTMENT USE ONLY**

Position Applied For is Open: ❑ Yes ❑ No

Position Considered For:

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

**NOTES**

**Applicant’s Statement**

I certify that the answers given herein and on any attachments 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 making an employment decision.

This application for employment shall be considered active for a period of 180 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are being accepted at that time.

**I HEREBY UNDERSTAND AND ACKNOWLEDGE THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP WITH THIS ORGANIZATION WOULD BE “AT-WILL,” WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND FOR ANY OR NO REASON, AND THE EMPLOYER MAY DISMISS THE EMPLOYEE AT ANY TIME AND FOR ANY OR NO REASON. IT IS FURTHER UNDERSTOOD THAT THIS “AT-WILL” EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THIS ORGANIZATION.**

In the event of my employment, I understand that falsification, misrepresentation or omission of information given in my application, resume or any attachments or interview(s) may result in denial of employment or immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant Date

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