



126 Paddock Street  
Crystal Lake, IL 60014

Phone: 815.459.1687  
Fax: 815.459.9581

## APPLICATION FOR EMPLOYMENT

*(please print)*

Position Applied For \_\_\_\_\_

Date \_\_\_\_\_ 20\_\_

### PERSONAL

Name \_\_\_\_\_

Current Address \_\_\_\_\_  
Number                      Street                      City                      State                      Zip

Primary Phone # \_\_\_\_\_                      Alternate Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Rate of pay expected \$ \_\_\_\_\_ per \_\_\_\_\_

Would you work full-time? \_\_\_\_\_ Part-time? \_\_\_\_\_ Summer Only \_\_\_\_\_ Yes \_\_\_\_\_ No

If Part-time, specify days \_\_\_\_\_ And hours \_\_\_\_\_

List any relatives working for us \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_ 20\_\_

### EDUCATION

Are you a high school graduate? \_\_\_\_\_

Schools attended including high school	Location (state)	Course or Major Studies	Credits Completed		Degree or Certificate
			Sem. Hrs.	Qtr. Hrs.	Type

Other training you have received (e.g. special courses and work training programs). Please estimate for each number of hours of training you received.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## EMPLOYMENT HISTORY

**Experience:** Start with your present or most recent job and work back. Include paid or unpaid, full or part-time, military, summer jobs, etc.

Is it OK if we check with your present supervisor?       Yes       No

*(NOTE: We may contact any previous supervisor to verify your descriptions of past duties.)      (Space for additional answers on last page)*

Starting Date	Name and address of employer:	
Ending Date	Hours per Week	Name, title, phone number and email of immediate supervisor:
Reason for leaving:		
Description of duties and responsibilities:		

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## SPECIAL QUALIFICATIONS

Describe special qualifications or skills related to the position for which you are applying.

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Are you under 16 years of age? \_\_\_\_\_

Are you 18 years of age or older? \_\_\_\_\_

Are you available to work evenings? \_\_\_\_\_

Are you available to work weekends? \_\_\_\_\_

Do you have any activities or responsibilities that might prevent you from meeting work schedules or attendance requirements? \_\_\_\_\_ If yes, give details:

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

How did you learn of the job opportunity for which you are applying?

\_\_\_\_\_

**REFERENCES**

List the names and phone numbers of three persons (not relatives) who would have knowledge of your qualifications for the position(s) for which you are applying, such as supervisors, co-workers, teachers, etc.

1.	_____	_____
	Name	Relationship (supervisor, etc)
	_____	_____
	Email address	Phone #
2.	_____	_____
	Name	Relationship (supervisor, etc)
	_____	_____
	Email address	Phone #
3.	_____	_____
	Name	Relationship (supervisor, etc)
	_____	_____
	Email address	Phone #

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history.

In making this application for employment I also understand that an investigative report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character and general reputation.

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

**The Crystal Lake Public Library is an Equal Opportunity Employer. All employees are employed at will.**

**NOTE: Applicants selected for an interview will normally be contacted within one month after the application deadline. Applicants not selected for an interview will not be notified.**

*(Additional answers here)*