

126 Paddock Street Crystal Lake, IL 60014 Phone: 815.459.1687 Fax: 815.459.9581

APPLICATION FOR EMPLOYMENT

(please print)

			Date	20
Position Applied F	or:			
		PERSONAL		
Name				
Current Address	Number	Street	City	State Zip
Primary Phone #			ternate Phone #	
Email Address				
Rate of pay expected	\$	per		
Would you work full-t	:ime?	Part-time?	Summer Only	/YesNo
f Part-time, specify d	ays		And hours	
ist any relatives worl	king for us			
f your application is o	considered fav	vorably, on what date will yo	u be available for work?	20
		EDUCATION	N	
Are you a high school	graduate?			
Schools attended including high school	Location (state)	Course or Major Studies	Credits Completed Sem. Hrs. Qtr. Hrs.	Degree or Certificate Type
Other training you for each number of h		ved (e.g. special courses g you received.	and work training	orograms). Please estimat

EMPLOYMENT HISTORY

Experience: Stamilitary, summe		nt or most recent job and work back.	Include paid or unpaid, full or part-time			
Is it OK if we check with your present supervisor?						
(NOTE: We may con	tact any previous superv	visor to verify your descriptions of past duties.)	(Space for additional answers on the 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 dutie	s and responsibilities:					
Starting Date	Name and address of employer:					
Ending Date	Hours per Week	Name, title, phone number and email of imm	ediate supervisor:			
Reason for leaving:						
Description of duties and responsibilities:						
Starting Date	Name and address of employer:					
Ending Date	Hours per Week	Name, title, phone number and email of imme	diate supervisor:			
Reason for leaving:						
Description of dutie	s and responsibilities:					
		SDECIAL OLIALIEICATIONS				
SPECIAL QUALIFICATIONS Describe special qualifications or skills related to the position for which you are applying.						

Are you under 16 years of age?				
Are you available to work evenings?				
Do you have any activities or responsibilities that might prevent you from meeting work schedules or attendan requirements? If yes, give details:				
How did you learn of the job opportunity for which	you are applying?			
List the names and phone numbers of three pe	EFERENCES ersons (not relatives) who would have knowledge of are applying, such as supervisors, co-workers, teachers, etc.			
1Name	Relationship (supervisor, etc)			
Email address	Phone #			
2Name	Relationship (supervisor, etc)			
Email address	Phone #			
3Name	Relationship (supervisor, etc)			
Email address	Phone #			
statements on this application shall be considered make any investigation of my personal history. In making this application for employment I also ur	t are true and complete. I understand that if employed, false sufficient cause for dismissal. You are hereby authorized to inderstand that an investigative report may be made whereby ws with my neighbors, friends, or others with whom I am nation 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 <u>not</u> be notified.

