

## **APPLICATION FOR EMPLOYMENT**

It is the policy of the Lake Villa District Library to afford Equal Employment Opportunity regardless of race, age, religion, color, marital status, national origin, gender, or sexual orientation. Further, all applicable laws relating to disability discrimination will be strictly followed.

APPLICAN	Γ INFORMATIO	ON							,	,	
Last Name			F	irst				M.I.		Date	
Street Address								Apartı	Apartment/Unit #		
City			S	tate				ZIP			
Phone			E	-mail Addr	ess						
Position applying for Date available to start											
Type of work desired: Full Time Part-Time Seasonal Year round Are you 16 years of age or older? Yes No											
Available to work: Daytime   Evenings   Weekends   Hours available to work:											
Have you worked for us before? YES ☐ NO ☐ If yes, when and in what position?											
Are you legally eligible to work in the United States? (If hired, verification will be required)  YES NO   EDUCATION											
High	TION						SS				
# of years attended:			Did y	/ou graduate? YES \( \square \) NO \( \square \) If no, year of expected gradua						graduation:	
College Address						SS					
# of years attended: Did y					te?	YES	NO [	Deg	gree		
Other			Address								
# of years atte	ended:		Did y	ou gradua	te?	YES	NO [	Deg	gree		
EMPLOYMENT HISTORY (Begin with most recent)											
Employer Phone											
Address	dress					uperviso	-				
Position/Duties											
From	То	Reason for Leaving	J								
May we contact your current supervisor?				YES	NO 🗆						
Employer					Р	hone					
Address					Supervisor						
Position/Duties											
From	То	Reason for Leaving	J								
May we contact your previous supervisor?				YES	N	NO 🗆					
Employer					P	hone					
Address					Supervisor						
Position/Duties											
From	То	Reason for Leaving	]								
	t your previous su			YES	N	0 🗆					
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ADDITIONAL COMMENTS RELATIN	G TO YOUR EMPLOYMENT HISTO	DRY
SKILLS/TRAINING/CERTIFICATIO other experience that are applicable to		tions that you acquired through employment or
BRIEFLY DESCRIBE WHAT YOU BE YOU WILL BE ABLE TO CONTRIBUT		E SKILL, KNOWLEDGE, OR TALENT THAT
TOO WILL BE ABLE TO CONTRIBUT	E TO LVDL.	
REFERENCES (Please provide names of	of three individuals not related to you	whom you have known at least one year)
Full Name	Turios marviadas not rolated to yea	whom you have known at loast one your,
Address	Phone	
Relationship	Years acquain	nted
Full Name		
Address	Phone	
Relationship	Years acquain	nted
Full Name		'
Address	Phone	
Relationship	Years acquain	nted
DISCLAIMER AND SIGNATURE		
application, my past employment, educ corporations supplying such information making such investigation. I also agree investigation are not satisfactory for an terminated immediately without any ob actually rendered if I have begun work	ation, and other activities, and I relean. I indemnify the Lake Villa District I that if any misrepresentations have by reason, any employment made to religation or liability to me other than for the Lake Villa District Library.	pation of all statements contained in this ase from all liability all persons, companies, and Library against any liability that might result from been made by me herein or the results of that ne by the Lake Villa District Library may be or payment, at the rate agreed upon, for services attion or in the granting of an interview or in any
policies, procedures, or handbooks that District Library and me for either emplo made to me. I understand that employ Library may terminate my employment,	I might receive is intended to create yment or the provision of any benefit ment at the Lake Villa District Library in the event that I am hired, with or	an employment contract between the Lake Villa t. No promises regarding employment have been a is employment at will, which means that the without cause or notice.
I hereby acknowledge that I have read	the above statement and understand	l it.
Signature		Date