

EMPLOYMENT APPLICATION

Rockford Public Library. 214 N. Church St., Rockford, IL 61101 www.rockfordpubliclibrary.org

Position Applying for		Date:							
EEOC statement : Rockford Public Library is an equal employment opportunity employer and prohibits discrimination because of race, color, religion, national origin, place of residence, political affiliation, disability status, marital status, sex, or age (except when sex, age, or handicap is a bona fide occupational qualification) in all aspects of our personnel policies, programs, practices and operations.									
Available for Work:	☐ Full Time	☐ Part Time	☐ Days ☐ Evenings ☐ Weeken		ends				
		PERSONAL I	NFORMAT	ION					
Name									
Last		First			Middle				
Address									
Street		City		State	State Zip				
Phone			Email						
		EDU	CATION						
		School Name & L	ocation	Majo	r or Fields	Did you Graduate?			
High School/ GED									
Trade/Technical									
College/Univ.									
Graduate School									
Are you legally autho						0			

EMPLOYEE HISTORY

(Please complete all information even if you have a resume.)

Begin with the most recent employment and work back. Account for all time during the past ten years, including periods of unemployment. Additionally, list any other paid or unpaid work experience that may qualify you for a position. Attached additional pages if necessary.

Date, Month &	Emplover Na	me & Address	Job Title/Duties	Reason for Leaving			
Year (mm/yy)							
From:							
То:							
From:							
То:							
From:							
To:							
From:							
To:							
			I				
Please list names of two business references:							
Name		Email		Phone			
Have you ever been co	onvicted of, or plead	led guilty to, a felor	ny or misdemeanor?				
Yes No Please Describe							
	_						
			ctors such as the position to be filed the violation, and rehabilitation will	=			
Background Checks "I hereby authorize Rockford Public Library to obtain my criminal history record information from the Illinois State Police under the Uniform Conviction Information Act, and to obtain any other source concerning my criminal convictions. I also authorize the Illinois State Police to release my information to Rockford Public Library. Rockford Public Library will provide me a copy of the information. I understand that I have the duty to notify Rockford Public Library within (7) working days of receipt if the information is inaccurate or incomplete."							
disqualification or remov any information about m release and covenant not understand that any such my employment with Roo of satisfactory recommer	to the above questions al from a Rockford Pub y suitability for employ to sue any person or a information is sought ckford Public Library is notations from former end. Upon my terminations	olic Library position. I a yment. I give permission organization for any re- with confidentiality, a conditional upon the employers and referent on from the Rockford F	re. I understand that falsification of this authorize Rockford Public Library to ma on to persons contacted to provide suclesult of providing, obtaining or acting upand I will not request copies of such info satisfactory completion of a Drug Screences. If hired, I may be terminated at the Public Library I authorize the release of the satisfactory of a provided in the release of the satisfactory I authorize the satisfactory I authorize the satisfactory I authorize I authoriz	ke inquiries about and receive th information. I forever waive, pon such information. I ormation. I also understand that ening Urinalysis, and the receipt e discretion of Rockford Public			
Signature Please sign	in ink		Date				