



EMPLOYMENT APPLICATION

Rockford Public Library, 215 N. Wyman 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 ☐ Weekends

PERSONAL INFORMATION

Name _____
Last First Middle

Address _____
Street City State Zip

Phone _____ Email _____

EDUCATION

| | School Name & Location | Major or Fields | Did you Graduate? |
|------------------|------------------------|-----------------|-------------------|
| High School/ GED | | | |
| Trade/Technical | | | |
| College/Univ. | | | |
| Graduate School | | | |

Are you legally authorized to work in the United States and at Rockford Public Library? ☐ Yes ☐ No

Summarize any special skills and qualifications from employment or other experiences:

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 & Year (mm/yy) | Employer Name & Address | Job Title/Duties | Reason for Leaving |
|----------------------------|-------------------------|------------------|--------------------|
| From: To: | | | |
| From: To: | | | |
| From: To: | | | |
| From: To: | | | |

Please list names of two business references:

| Name | Email | Phone |
|------|-------|-------|
| | | |
| | | |

Have you ever been convicted of, or pleaded guilty to, a felony or misdemeanor?

Yes _____ No _____ Please Describe _____

A conviction does not automatically disqualify an applicant. Factors such as the position to be filed, age at time of offense, time elapsed since the violation, the seriousness and the nature of the violation, and rehabilitation will be considered.

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."

Read carefully before signing:

I certify that all answers to the above questions are true and complete. I understand that falsification of this application may result in disqualification or removal from a Rockford Public Library position. I authorize Rockford Public Library to make inquiries about and receive any information about my suitability for employment. I give permission to persons contacted to provide such information. I forever waive, release and covenant not to sue any person or organization for any result of providing, obtaining or acting upon such information. I understand that any such information is sought with confidentiality, and I will not request copies of such information. I also understand that my employment with Rockford Public Library is conditional upon the satisfactory completion of a Drug Screening Urinalysis, and the receipt of satisfactory recommendations from former employers and references. If hired, I may be terminated at the discretion of Rockford Public Library without obligation. Upon my termination from the Rockford Public Library I authorize the release of references information on my work. A copy of this authorization shall be effective as the original

Signature _____
Please sign in ink

Date _____