

APPLICATION FOR EMPLOYMENT

Newton Public Library

720 N. Oak

Newton, KS 67114

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT IN INK)

Position(s) Applied for			Date of Application		
How Did You Learn About Us?					
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend		<input type="checkbox"/> Walk-In	
<input type="checkbox"/> Employment Agency		<input type="checkbox"/> Relative		<input type="checkbox"/> Other _____	
Last Name		First Name		Middle Name	
Address		Number	Street	City	State
					Zip Code
Telephone Number(s)			Social Security Number		

Do you meet the minimum 16 years of age for employment? Yes No

On what date would you be available for work? _____

Are you available to work: Full Time Part Time

If part time, specify days and hours available for work _____

Have you ever been employed with us before? Yes No

If Yes, give date: _____

Do you have a valid Kansas driver's license? _____

Are you related to any employee? _____

If so, state name and relationship _____

Have you been convicted of a crime? Yes No

If Yes, please explain _____

If you are hired, you must provide proof of authorization to work in the United States.

REFERENCE

Give name, address and telephone number of three references who are not related to you.

1.
2.
3.

Attach your resume which must be submitted with the application form.

NPL IS AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

School	Name and Location of School	Dates Attended	Did you Graduate? Yes or No	Degree or Diploma
Elementary				
High School				
College				
Graduate School				
Business/Trade/Technical				

State any additional information you feel may be helpful to us in considering you application. _____

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

1. Employer	Telephone ()
Address	Employed – (State month and year) From To
Name of Supervisor	Weekly pay Start Last
State Job Title and Describe Your Work _____	Reason for Leaving
2. Employer	Telephone ()
Address	Employed – (State month and year) From To
Name of Supervisor	Weekly pay Start Last
State Job Title and Describe Your Work _____	Reason for Leaving
3. Employer	Telephone ()
Address	Employed – (State month and year) From To
Name of Supervisor	Weekly pay Start Last
State Job Title and Describe Your Work _____	Reason for Leaving

The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I authorize the Newton Public Library to request my school records if necessary.

Date _____ Signature _____