

Employment Application

Clearwater Memorial Public Library

P.O. Box 471

Orofino, Idaho 83544

(208) 476-3411

To be considered an applicant, you must complete this form. A resumé may also be attached. Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered.

IT IS THE POLICY of Clearwater Memorial Public Library to provide equal opportunity in all terms, conditions and privileges of employment for all qualified job applicants and employees without regard to race, color, national origin, gender or age (unless a bona fide job requirement) or the presence of any disability. Reasonable accommodations will be made for disabled persons.

Name _____ email _____

Address _____

Phone: Home _____ Cell _____

Applying for: Part time _____ Substitute _____

Are you legally eligible to work in the United States? Yes _____ No _____
(Federal law requires proof of identity and employment authorization for all new employees.)

If selected for employment are you willing to submit to a background check? ____ Yes ____ No

Can you travel if the job requires it? Yes _____ No _____

Do you have a valid driver's license? Yes _____ No _____

Educational Background:

Do you have a high school diploma or GED Certificate? ____ Yes ____ No

School attended after high school or special training:

Name	Location (City/State)	Date Attended

Please rate your Technology Skills:

Word processing: MS Word: ___ none ___beginner ___intermediate ___advanced

Spreadsheet: MS Excel: ___ none ___beginner ___intermediate ___advanced

Presentations: MS PowerPoint: ___ none ___beginner ___intermediate ___advanced

Please rate your Internet Skill: ___ none ___beginner ___intermediate ___advanced

Circle any that apply: Copier Scanner Multi-line phone system Fax

Other equipment and /or software skills/experience:

Employment record: May we contact your present employer? Yes _____ No _____

Give present or most recent employer first, date of employment, brief description of position, reason for leaving, etc.

1. _____

2. _____

3. _____

List names/addresses/phone numbers of two references (*not* family members):

1. _____
2. _____

Certification: I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should an investigation disclose untruthful or misleading answers, my application may be rejected, my name removed from consideration, or my employment may be terminated.

I understand and agree that, if hired, my employment is for no definite period and either Employer or I may terminate our relationship at any time, and that this employment application does not constitute an employment contract.

Signature of applicant: _____ Date: _____