

# GREEN HILLS PUBLIC LIBRARY DISTRICT

8611 W. 103<sup>rd</sup> St., Palos Hills, IL 60465 | (708) 598-8446

# EMPLOYMENT APPLICATION

All applicants will be considered without regard to race, color, gender, national origin, age, religion, disability, marital or veteran status, sexual orientation or any other legally protected status. We are an Equal Opportunity Employer.

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
Street/Apt. # City/State Zip

Phone Number: \_\_\_\_\_ Have you ever been employed in an IMRF position?  Yes  No

Email Address: \_\_\_\_\_ Are you at least 16 years of age?  Yes  No

## POSITION APPLIED FOR AND AVAILABILITY

Position desired: \_\_\_\_\_ Salary desired: \_\_\_\_\_

Days and hours available to work:  Flexible (available to work any day—daytime, evenings, weekends)

Limited (indicate days and hours available to work below)

Day/Time	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From							
To							

Do you intend to be a student or hold another job while working here?  Yes  No

If "yes", please explain: \_\_\_\_\_

Were you ever employed by Green Hills Public Library District?  Yes  No If "yes", when? \_\_\_\_\_

Available start date: \_\_\_\_\_

## MISCELLANEOUS

Are you related to anyone currently employed by the Green Hills Public Library District?  Yes  No

If yes, give name and relationship: \_\_\_\_\_

How did you learn about employment at our Library?  Referral (Name: \_\_\_\_\_)

Walk-in  Library Website  RAILS Website  College/School  Other: \_\_\_\_\_

## EDUCATION

School	Name	Graduated?	Course of Study
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business/Trade/ Graduate/Other		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Describe any specialized training, apprenticeships, skills, and extracurricular activities (Exclude organizations, the name of which reveal race, color, gender, national origin, age, religion, disability, sexual orientation or other protected status): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT HISTORY** (Please start with your present or last job)

Company Name and Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Job Title/Department: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Salary Start: \$ \_\_\_\_\_ Salary Final: \$ \_\_\_\_\_ Specific Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company Name and Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Job Title/Department: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Salary Start: \$ \_\_\_\_\_ Salary Final: \$ \_\_\_\_\_ Specific Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company Name and Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Job Title/Department: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Salary Start: \$ \_\_\_\_\_ Salary Final: \$ \_\_\_\_\_ Specific Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

I certify that my answers to the foregoing questions are true and correct, and that I have not knowingly withheld any fact or circumstances that would, if disclosed, affect my application unfavorably. I understand that any false information submitted in this application may result in my termination. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I understand this application does not constitute an employment contract of any kind. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date