



# ANTIOCH PUBLIC LIBRARY DISTRICT

757 N. Main Street, Antioch, Illinois 60002 • 847-395-0874 • www.apld.info

## APPLICANT INFORMATION

Last Name		First	M.I.	Date
Street Address			Apartment/Unit #	
City		State	ZIP	
Phone		Secondary Phone No.		
Date Available				Desired Salary
Position		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>
				NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	

## EDUCATION

High School		Address		
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College		Address		
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other		Address		
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	

## REFERENCES

Please list the names for three persons not related to you, whom you have known at least one year.

Full Name		Relationship
Company		Phone (     )
Address		
Full Name		Relationship
Company		Phone (     )
Address		
Full Name		Relationship
Company		Phone (     )
Address		

**PREVIOUS EMPLOYMENT**

Company		Phone (    )
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone (    )
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company		Phone (    )
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?    YES    NO		

**GENERAL INFORMATION**

Special Training
Special Skills
Subject of Special Study/Research Work

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment of any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

Signature	Date
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