

**APPLICATION FOR EMPLOYMENT
SHERIDAN COUNTY PUBLIC LIBRARY SYSTEM
335 W Alger, Sheridan, WY 82801**

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. As required by law, we provide reasonable accommodation as necessary for the disabled.

SHERIDAN COUNTY PUBLIC LIBRARY SYSTEM IS AN EQUAL OPPORTUNITY EMPLOYER

Position _____ Date of application _____

Last Name _____ First Name _____ Middle Initial _____

Mailing Address _____ City _____ State _____ Zip _____

Email Address _____ Telephone No. _____

Have you ever filed an application with us before? yes no
If yes, give date: _____

Have you ever been employed with us before? yes no
If yes, give date & position: _____

Are you currently employed? yes no

If yes, may we contact your present employer? yes no

Are you prevented from lawfully becoming employed in this country because of Visa or immigration Status? (Proof of citizenship or immigration status will be required upon employment.) yes no

Have you been convicted of a felony within the last 7 years? yes no
(Conviction will not necessarily disqualify an applicant from employment.)

If yes, explain: _____

Applying for: Full Time Part Time Seasonal

On what date would you be available for work? _____

EDUCATION AND TRAINING

Circle highest grade completed: 7 8 9 10 11 12 or GED College: 1 2 3 4 5 6

Name and location of last high school attended: _____

Name and Location of College/Vocational Schools, Apprenticeship, Internships, etc:	Dates Attended	Course of Study	Graduate	Degree/Certification
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List any additional training, honors, and achievements:

List all office equipment/machines/technology that you can operate:

List computer programs with which you are proficient:

ADDITIONAL INFORMATION: Please state any additional information you believe may be helpful to us in considering your application.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

If you need additional space, please continue on the back page of this application.

Employer	Dates Employed From: To:	Work Performed
Mailing Address		
City/State/Zip		
Telephone No.	Job Title	
Email address	Supervisor	

Employer	Dates Employed From: To:	Work Performed
Mailing Address		
City/State/Zip		
Telephone No.	Job Title	
Email address	Supervisor	

Employer	Dates Employed From: To:	Work Performed
Mailing Address		
City/State/Zip		
Telephone No.	Job Title	
Email address	Supervisor	

Employer	Dates Employed From: To:	Work Performed
Mailing Address		
City/State/Zip		
Telephone No.	Job Title	
Email address	Supervisor	

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Name Relationship Phone No. Email

Mailing Address City/State/Zip

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Mailing Address City/State/Zip

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. As an applicant for employment with the Sheridan County Public Library System, I understand that a background investigation may be conducted to qualify me for eligibility. I hereby authorize the custodian of any information related to my previous employment, driving record, education, residence, criminal convictions, credit standing, or character, to release said information unless restricted by law. This authorization is made voluntarily, for the purpose of employment only. Upon receipt of this document please release information directly related to the above categories and to which you have direct knowledge or documented evidence. I agree to hold harmless any individual or agency involved with the authorized release of legitimate information. Thank you for your cooperation.

Authorized by Applicant: Print Full Name Date

Signature of Applicant Phone

Address City / State / Zip

Social Security Number Driver's License No. / State