

EMPLOYMENT APPLICATION

Laramie County Library System is an Equal Opportunity Employer and a Drug Free Workplace. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, veteran status, sexual orientation, or any other legally protected status. Consistent with Americans with Disabilities Act (ADA) and Wyoming Fair Employment Practices Act, it is the policy of Laramie County Library System to provide reasonable accommodation when requested by a qualified applicant or employee with a disability, unless such accommodation would cause an undue hardship.

PERSONAL

Position:		How did you learn about this job opening?		Date:	
Last Name:		First Name:			MI:
Mailing Address:		City:		State:	Zip:
Phone:		Email:			

YES NO

	Are you under 16 years of age? If YES, employment is subject to verification of age.
	Are you a U. S. citizen? If NO, state your immigration status:
	Are you currently employed? If YES, may we contact your present employer? Yes No
	Have been fired or asked to resign from a job? If YES, please explain:
	Have you read the Fact Sheet and Job Description for this position?
	Do you meet the minimum requirements for this position?
	Are you willing to work the hours the library is open? If NO, please explain:
	Are you fluent in a language other than English? If YES, which language(s)?

Would you prefer to work? Full-time Part-time | If part-time, how many hours per week?

What date would you be available to start work?

Hiring is contingent upon eligibility to work in the United States. A background check is required for employment.

YES NO

	Have you ever been convicted of a felony or any crime which carried the potential of a jail sentence in Wyoming or any other state or territory of the United States or any foreign country? <i>(This does not include minor traffic offenses, but <u>does</u> include alcohol-related traffic incidents or convictions resulting from accidents involving injury to persons.)</i>
	If YES, explain and provide the date of conviction(s), the nature and title of the offense and the jurisdiction in which the conviction occurred:

EDUCATION

List education history starting with the most recent educational institution.

Name of Institution	Location (CITY & STATE)	Course of Study	No. of Years Completed	Did you Graduate?	Type of Degree	Date of Degree
				Yes No		
				Yes No		
				Yes No		
				Yes No		
				Yes No		

EMPLOYMENT EXPERIENCE

List employment history starting with your current or most recent employer. Account for all periods, including military service and/or periods of unemployment or self-employment during the last five years. Include earlier employment if it is relevant to this position. Attach a second application listing employment experience only, if necessary. **YOU MUST COMPLETE THIS SECTION EVEN IF YOU ATTACH A RÉSUMÉ.**

EMPLOYER (1) (current or most recent):					Dates Employed (MO/YR): From: To:	
Address:		City:		State:	Zip:	Total No. of Yrs. & Mos.:
Job Title:			Name of Supervisor:			Supervisor Phone No.:
Type: Full-time Part-time	Hours Per Week:	Starting Salary:	Ending Salary:	Reason for Leaving:		
Work Performed:						
EMPLOYER (2):					Dates Employed (MO/YR): From: To:	
Address:		City:		State:	Zip:	Total No. of Yrs. & Mos.:
Job Title:			Name of Supervisor:			Supervisor Phone No.:
Type: Full-time Part-time	Hours Per Week:	Starting Salary:	Ending Salary:	Reason for Leaving:		
Work Performed:						
EMPLOYER (3):					Dates Employed (MO/YR): From: To:	
Address:		City:		State:	Zip:	Total No. of Yrs. & Mos.:
Job Title:			Name of Supervisor:			Supervisor Phone No.:
Type: Full-time Part-time	Hours Per Week:	Starting Salary:	Ending Salary:	Reason for Leaving:		
Work Performed:						
EMPLOYER (4):					Dates Employed (MO/YR): From: To:	
Address:		City:		State:	Zip:	Total No. of Yrs. & Mos.:
Job Title:			Name of Supervisor:			Supervisor Phone No.:
Type: Full-time Part-time	Hours Per Week:	Starting Salary:	Ending Salary:	Reason for Leaving:		
Work Performed:						
EMPLOYER (5):					Dates Employed (MO/YR): From: To:	
Address:		City:		State:	Zip:	Total No. of Yrs. & Mos.:
Job Title:			Name of Supervisor:			Supervisor Phone No.:
Type: Full-time Part-time	Hours Per Week:	Starting Salary:	Ending Salary:	Reason for Leaving:		
Work Performed:						

ADDITIONAL INFORMATION

List any other relevant experience, education, special skills or certificates. Include your proficiency with computers and software.

APPLICANT STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that this application is effective for the position applied for only and will submit a separate application if interested in applying for additional position vacancies.

I hereby understand and acknowledge that Laramie County Library System is an at-will employer. Either Laramie County Library System or the employee can terminate employment at any time for any reason or no reason. There are no promises, expressed or implied, for continued employment, and no one may waive or modify these conditions of employment.

Laramie County Library System policies are not intended to be construed as part of any employment relationship and/or contract, and are simply general statements or organizational policy. Laramie County Library System policies are subject to change under the direction of the governing body, Laramie County Library System Board of Directors.

In the event of employment, I understand that false or misleading information given in my application or interview process may result in discharge. I understand that I am required to abide by all rules and regulations of Laramie County Library System.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement. I understand that checking this box constitutes a legal signature.

Applicant Name

Date

LIBRARY USE ONLY

Interview Arranged? YES: _____ NO: _____

Remarks: _____

Interviewed By & Date

Employed? YES: _____ NO: _____