

Chillicothe Public Library District

Employment Application

430 N Bradley St. | Chillicothe, IL 61523 | 309-274-2719 | chillipld.org

Current Date: _____ Date available to begin work: _____

Please Print or Type. An incomplete application may result in a lost employment opportunity.

PERSONAL INFORMATION

Last Name		Middle Name	First Name
Street Address			City, State, Zip Code
Preferred Telephone:			Hours available:
Email Address (print clearly):			Hours desired: Full time <input type="checkbox"/> Part time <input type="checkbox"/>
Are you age 18 or above? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, Give Date of Birth (mm/dd/yy): _____			
Have you ever been employed by the Chillicothe PLD? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, list date last worked: _____			
Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: _____			
Are you able to provide proof of your lawful authorization to work in the U.S. for the Chillicothe Public Library District? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>Proof of your legal right to work for the Library will be required if employed.</i>			
Please indicate the services in which you are interested? <input type="checkbox"/> Customer Services <input type="checkbox"/> Children's Services <input type="checkbox"/> Technical/AV			

EDUCATION/TRAINING

Circle the HIGHEST Grade Completed:		High School:	College:	Post Graduate:
Grade School: 1 2 3 4 5 6 7 8		9 10 11 12	1 2 3 4	M.A. Ph. D.
High School Attended				
Name			Are you a High School Graduate? If not, did you obtain a G.E.D.?	
City	State	Zip		
College or University Attended				
Name			Degree(s) received:	
City	State	Zip		
College or University Attended				
Name			Degree(s) received:	
City	State	Zip		

EMPLOYMENT HISTORY

Provide a full and complete list of your employment history. Start with your current or most recent employer.

Have you ever been discharged or terminated from employment? Yes No If yes, explain:

Employer Name	Supervisor's Name	Dates Employed From: To:
Mailing Address	Supervisor's phone number	Reason for leaving
Job Title	Duties:	
Employer Name	Supervisor's Name	Dates Employed From: To:
Mailing Address	Supervisor's phone number	Reason for leaving
Job Title	Duties:	
Employer Name	Supervisor's Name	Dates Employed From: To:
Mailing Address	Supervisor's phone number	Reason for leaving
Job Title	Duties:	
Employer Name	Supervisor's Name	Dates Employed From: To:
Mailing Address	Supervisor's phone number	Reason for leaving
Job Title	Duties:	
Employer Name	Supervisor's Name	Dates Employed From: To:
Mailing Address	Supervisor's phone number	Reason for leaving
Job Title	Duties:	

The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

Applicant Signature

Date

Certificate of Applicant

(Read this statement carefully before signing)

I understand that any employment with the Chillicothe Public Library District is considered **employment-at-will**. I understand that any employment relationship entered into with the Town may be terminated at any time for any or no reason.

I hereby certify that all statements made on or in connection with this application, including those regarding my training and experience are true and complete to the best of my knowledge and belief and I understand and agree that any misstatements or omission of material fact herein will cause forfeiture on my part of all rights to employment by the Chillicothe Public Library District.

I understand that I will have to provide acceptable documentation attesting that I am a U.S. Citizen or legal alien eligible for work in the United States.

Applicant Signature _____ Date: _____

Printed Applicant Name _____

Equal Opportunity Employer

It is the policy of the Chillicothe Public Library District to provide employment, compensation, promotion and other conditions of employment without regard to race, color, religion, sex, sexual orientation, marital status, ancestry, national origin, age, disability, matriculation or political affiliation, unfavorable military status, or other legally protected status, association or expression, in accordance with law. Anyone needing an ADA accommodation must contact Chillicothe Public Library District in a timely manner prior to the start of the selection process.