117 W STATE ST FOX LAKE WI 53933 920-928-3223

## **FOX LAKE PUBLIC LIBRARY**

## **Employment Application**

Applicant Information										
Full Name:				DOB:						
	Last	First		M.I.						
Address:	Street Address				Apartment/Unit #					
	Oli Coli Fidal Colo				T paranoni one #					
	City			State	ZIP Code					
Phone:		Ema	i <u> </u>							
Date Availal			Desired Salary:							
Position App	olied for:									
YES NO  Are you a citizen of the United States?  YES NO  If no, are you authorized to work in the U.S.?										
YES NO Have you ever been convicted of a felony?										
If yes, explain:										
Education										
High School	l:	Address:								
From:	To:	YE Did you graduate?		Diploma:						
College:		Address:								
From:	To:	YE Did you graduate?		Degree:						
Other:		Address:								
From:	To:	YE		Degree:						

		General I	nformatio	n	
Special Sk	ills				
Special Tra	aining				
Groups/ O	rganizations				
	_				
		Previous I	Employme	nt	
Company:					Phone:
Address:					Supervisor:
Job Title:		Starting	Salary: <u>\$</u>		Ending Salary:
Responsibili					
From:	-	Го:	Reason fo	or Leaving:	
May we con		pervisor for a reference?	YES	NO	
Company:					Phone:
Address:					Supervisor:
Job Title:		Starting	Salary: <u>\$</u>		Ending Salary:
Responsibili	ties:				
From:		Го:	Reason fo	or Leaving:_	
May we con	tact your previous su	pervisor for a reference?	YES	NO	
Company					Phono
Company: Address:					Phone: Supervisor:
Job Title:		Starting	Salary: <u>\$</u>		Ending Salary:\$
Responsibili	ties:				
From:		Го:	Reason fo	or Leaving:_	
May we con	tact your previous su	pervisor for a reference?	YES	NO	

				Availability						
		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
	From									
-										
	Until									
	011									
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				Military Service	9					
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Br	anch:				From:		To:			
D,	ank at Dicaha	orgo:		Typo	of Discharge:					
Πč	ank at Discha	arge.		rype (	of Discharge:					
If a	other than ho	onorable, explain:								
	outor than the	morabio, explain.								
				References						
PI	ease list two	o professional an	nd two personal re	ferences.						
Fι	ıll Name:				Relationship:					
Co	ompany:					Phone:				
Αc	ddress:									
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Fι	ıll Name:				Rel	ationship:				
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Ac	ddress:									
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Full Name:			Relationship:							
Co	ompany:					Phone:				
Ac	ddress:									
Fι	ıll Name:				Rel	ationship:				
Company:					Phone:					
AC	ddress:						_			
			Discl	aimer and Sign	ature					
10										
	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									
ın	interview may result in my release.									
Signature: Date:										
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