

Employment Application

PERSONAL INFORMATION Incomplete information could disqualify you from further con	nsideration. Please complete all fields
Name	Date
Address	
E-mail Address	
Home Phone	Mobile
Are you eligible to work in the U.S? Yes No No	
Have you ever worked for the City? Yes No	
Are you at least 16 years or older? Yes No	
Position you are applying for:	
Can you work any shift? Yes No No	
If no, what shift or hours can you work?	
Date you can start:	Hourly Rate/Salary desired:
Are you currently employed? If so may we	inquire of your present employer?
REFERRAL SOURCE	
How did you hear about us?	
Do you know anyone who works for our organization?	

EDUCATION				
High School:			Address:	
From	То	Did you graduate?	Degree or subject of study	
College/University:			Address:	
From	То	Did you graduate?	Degree or subject of study	
Other:			Address:	
From	То	Did you graduate?	Degree or subject of study	
Relevant skills/SPECIAL SKILLS				
List any other skills or qualifications, which you feel are relevant for job applying for (volunteer and school related activities, computer skills, etc.):				
NOTICE Wisconsin Open Records Law: Under section 19.36(7) of Wisconsin Statutes, the names of the "final candidates" must be open to public inspection. That statute also provides that if an applicant does not want his/her name revealed prior to being a "final candidate" they can do so by making that request in writing. If you do not want your name revealed prior to becoming a "final candidate" please sign here:				

Date

Signature

backwards in time. Incomplete information could disqualify you from further consideration.		
Dates of Employment:	Position:	
Name of Employer:		
Address:		
Supervisor Name:	Phone:	
Summarize the nature of work performed and job responsibilities:		
Reason for leaving:		
If you were unemployed for a period, please give dates?		
Dates of Employment:	Position:	
Name of Employer:		
Address:		
Supervisor Name:	Phone:	
Summarize the nature of work performed and job responsibilities:		
Reason for leaving:		
If you were unemployed for a period, please give dates?		
Dates of Employment:	Position:	
Name of Employer:		
Address:		
Supervisor Name:	Phone:	
Summarize the nature of work performed and job responsibilities:		

EMPLOYMENT HISTORY, including periods of unemployment, starting with the most recent and working

Reason for leaving:		
If you were unemployed for a period, please give dates?		
REFERENCES Give the names of three people not related to you, whom you have known at least three (3) years.		
Name:		
Address, phone, email:		
Company: Years Acquainted:		
Name:		
Address, phone, email:		
Company: Years Acquainted:		
Name:		
Address, phone, email:		
Company: Years Acquainted:		
Please read carefully before signing.		
The Rhinelander District Library is an equal opportunity employer. The Rhinelander District library does not discriminate in employment because race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service, or any other characteristic protected by law.		
I understand that neither the completion of this application nor any other part of my consideration for employment establishes an obligation for the Rhinelander District Library to hire me. If I am hired, I understand that either the Rhinelander District Library or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of the Rhinelander District Library has the authority to make any assurance to the contrary.		
I attest with my signature below that I have given to the Rhinelander District Library true and complete information on this application. No requested information has been concealed. I authorize the Rhinelander District Library to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.		

Date

Complete all questions on application, print, date & sign.

Submit Digital Copy only to the below email:

Signature