## **Application for Employment**

**JEFFERSON DAVIS PARISH LIBRARY** is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made based on qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

<u>PLEASE TYPE OR PRINT</u>. Complete the entire application. You may attach a resume, but you must still complete all questions or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid job numbers will not be considered for any position.

Position Applying for:	Name (Last, First, Middle):				
Street Address: City, S		City, State &	ate & Zip:		
Email address:	Cell / H	ome Phone:		Work Phone:	
May we contact you at work?	Yes	No	If necessary, bes	t time to call you is:	
What is your desired salary range or hourly rate of pay?		/	Date available to	o work:	
Will you work overtime if required?	Yes	No			
Are you eligible to work in the United States?	Yes	No			
Are you 18 years of age or older?	Yes	🗌 No	If NO, what is yo	our current age?	
Have you ever been employed by JEFF DAVIS PARISH LIBRARY?	☐ Yes	No	If YES, dates of	employment & reason for leaving:	
Are you related to any current JEFF DAVIS PARISH LIBRARY staff?	Yes	🗌 No	If YES, their nar	ne & their relationship to you?	
Do you have a valid driver's license?	Yes	No	If YES, State of	issuance, license #, and expiration date:	
Do you have reliable transportation to and from work?	The Yes	🗌 No			
How did you learn about this employment opportunity at JEFF DAVIS PARISH LIBRARY? Check all that apply: Ad in <i>newspaper</i> Job Bulletin (Posting)/Walk-in Website/Facebook Referral by employee Other:					

## **EDUCATION**

		Did you	Year	Degree earned	
Name of School	City/State	graduate?	Graduated		Major
High School:		Yes No			
GED:		Yes No			
Other School:		Yes No			
College:		□Yes □ No			
College:		Yes No			

**SKILLS:** Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert)

**WORK EXPERIENCE**-Please detail your <u>entire</u> work history. Begin with your <u>current</u> or most recent employer. If you held multiple positions with the same organization, detail each position separately. <u>Attach additional sheets if necessary</u>. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. **PLEASE DO NOT** complete this information with the notation "See Resume."

**PLEASE NOTE: JEFF DAVIS PARISH LIBRARY** reserves the right to contact all current and former employers for reference information.

Dates Employed (most recent position)		Title:
From: To	Full time Part-time	
	If part-time, # hrs/wk:	
Starting Salary:	Organization Name and Addres	s:
Final Salary:		
Supervisor's Name, Title and Phone #:	Other Reference Name, Title	Contact my current references:
	and Phone #:	At any time
		Only if I am a finalist candidate
Primary duties:		Reason for Leaving:

Dates Employed From:	То	Full time Part-time	Title:
		If part-time, # hrs/wk:	
Starting Salary:		Organization Name and Addres	s:
Final Salary:			
Supervisor's Name, Title and	Phone #:	Other Reference Name, Title and Phone #:	Contact my current references: At any time Only if I am a finalist candidate
Primary duties:			Reason for Leaving:

Dates Employed			Title:
From:	То	Full time Part-time	
		If part-time, # hrs/wk:	
Starting Salary:		Organization Name and Addres	s:
Final Salary:			
Supervisor's Name, Title	e and Phone #:	Other Reference Name, Title	Contact my current references:
		and Phone #:	At any time
			Only if I am a finalist candidate
Primary duties:			Reason for Leaving:

Explain any gaps in your employment, other than those due to personal illness, injury, or disability.

If not addressed on previous page, have you ever been fired or asked to resign from a job?	Yes	🗌 No
If yes, please explain:		

**REFERENCES**-Please provide 3 personal and/or professional reference(s) below:

Reference	Contact Information

## PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered later. I authorize JEFFERSON DAVIS PARISH LIBRARY to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal, and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that employees of JEFFERSON DAVIS PARISH LIBRARY serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the JEFFERSON DAVIS PARISH LIBRARY Retirement System or to an optional retirement program, if applicable. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Applicant Signature: \_\_\_\_\_

Date:\_\_\_\_\_