

APPLICATION FOR EMPLOYMENT

Internal Use Only
Q _____ NQ _____



305 South Duke Street, LaFayette, GA 30728 www.chrl.org

POSITION APPLIED FOR:

___ Library Assistant ___ Library Manager
___ Youth Education Coordinator ___ Technology

LOCATION OF POSITION:

___ Chickamauga ___ La Fayette ___ Region
___ Trenton ___ Rossville

All information provided on this application **MUST BE COMPLETE** so that all applications can be given equitable consideration. All qualified applicants will receive consideration for employment regardless of race, color, religion, sex, age, national origin or disability. Cherokee Regional Library System will hire only authorized workers, regardless of national origin. This application must be typed or printed. Please complete one application for each position for which you are applying. **YOU MUST SIGN AND DATE YOUR APPLICATION IN INK. RESUMES ARE NOT ACCEPTED IN LIEU OF A COMPLETED APPLICATION. BY SIGNING THIS APPLICATION YOU ARE AUTHORIZING A COMPLETE BACKGROUND CHECK ONCE AN OFFICIAL JOB OFFER HAS BEEN MADE**

INCOMPLETE APPLICATIONS MAY BE REJECTED

Personal Data

Date of Application: _____

Last Name First (given) Middle Other name(s) under which you have been employed

Address: Street Apt # City State Zip Code

E-mail Address: _____

Telephone: _____
Home Phone # Work Phone # Cell Phone #

How did you hear of this opening? _____ Date available to begin: _____

WILL YOU ACCEPT: Temporary Work? Part-Time Work? Weekends? (Check all that apply)

PLEASE INDICATE ANY SPECIFIC TIMES WHEN YOU ARE NOT ABLE TO WORK:

Are you over 18 years old? _____ Are you eligible to work in the United States either because you are a U. S. citizen or have U. S. government permission to do so? No Yes

NOTE: If offered employment you will be required to provide documentation to verify employment eligibility. Failure to provide the requested documentation may result in a determination that the applicant is ineligible for employment in the United States.

DRIVER'S HISTORY INFORMATION:

Do you have a valid Drivers License? No Yes

License # _____ Class _____ State _____

Have you received any traffic violations in the past 3 years? No Yes If yes, list type of offense and dates:

Have you ever been suspended, demoted, dismissed or asked to resign from any job? No Yes

If yes, explain in detail: _____

EDUCATION

High School

Name _____ Address: _____
(name of the high school or state authority issuing the diploma or certificate)

Circle highest grade completed: 7 8 9 10 11 12 Graduated? No Yes

If not a high school graduate, do you have a GED? No Yes

Colleges/Universities

Please complete the following section for post-secondary education (Technical Schools/Colleges/Universities):

Name of School	City	State	If No Degree, Hours Earned		Major	Type of Degree	Degree Earned yes/no
			Quarter	Semester			

Describe your **COMPUTER SKILLS** and any specialized training, qualifications, apprenticeship, skills, and extra-curricular activities which relate to the job for which you are applying. Include office equipment, foreign language skills, typing skills, and business equipment or machine operating skills which may relate to the position for which you are applying. Use additional sheets if necessary.

REFERENCES – Give names, addresses, and telephone numbers of three (3) references that **ARE NOT** related to you and **ARE NOT** previous employers.

1. _____
Name Phone #

Address: Street Apt # City State Zip Code

2. _____
Name Phone #

Address: Street Apt # City State Zip Code

3. _____
Name Phone #

Address: Street Apt # City State Zip Code

Work History

Describe your work history **beginning with your current or most recent job**. Include military and volunteer experience and periods of unemployment. Failure to give complete information regarding each job held may result in your disqualification. Complete addresses with zip codes and telephone numbers for all employers are necessary.

A resume may be attached only as additional information and will not be accepted in lieu of completing this section. Use additional sheets if necessary.



Name of Organization or Firm: _____ Telephone: _____

Address: _____
Street
City State Zip Code
Dates Employed:
From Mo/Yr _____ To Mo/Yr _____
Total Time Employed: _____

Name of Your Supervisor: _____ Pay Start: _____ End: _____

Your Official Job Title: _____

Specific Reason for Leaving: _____

Describe Your Specific Job Duties: _____



Name of Organization or Firm: _____ Telephone: _____

Address: _____
Street
City State Zip Code
Dates Employed:
From Mo/Yr _____ To Mo/Yr _____
Total Time Employed: _____

Name of Your Supervisor: _____ Pay Start: _____ End: _____

Your Official Job Title: _____

Specific Reason for Leaving: _____

Describe Your Specific Job Duties: _____



Name of Organization or Firm: _____ Telephone: _____

Address: _____

Street

Dates Employed:

From Mo/Yr _____ To Mo/Yr _____

City State Zip Code

Total Time Employed: _____

Name of Your Supervisor: _____ Pay Start: _____ End: _____

Your Official Job Title: _____

Specific Reason for Leaving: _____

Describe Your Specific Job Duties: _____



Name of Organization or Firm: _____ Telephone: _____

Address: _____

Street

Dates Employed:

From Mo/Yr _____ To Mo/Yr _____

City State Zip Code

Total Time Employed: _____

Name of Your Supervisor: _____ Pay Start: _____ End: _____

Your Official Job Title: _____

Specific Reason for Leaving: _____

Describe Your Specific Job Duties: _____



Name of Organization or Firm: _____ Telephone: _____

Address: _____

Street

Dates Employed:

From Mo/Yr _____ To Mo/Yr _____

City State Zip Code

Total Time Employed: _____

Name of Your Supervisor: _____ Pay Start: _____ End: _____

Your Official Job Title: _____

Specific Reason for Leaving: _____

Describe Your Specific Job Duties: _____



Please use this space for additional information pertinent to your education, training and experience:

Signed: _____

Date: _____

"We are an Equal Opportunity Employer"