



Chico Public Library, Inc.

106 W. Jacksboro P. O. Box 707 Chico, TX 76431

Phone: 940-644-2330 Fax: 940-644-0004

E-mail: chicopublib1@gmail.com

EMPLOYMENT APPLICATION

Please use care in preparing this application. If the information you submit is incorrect, it may disqualify you from consideration for employment and may be considered a basis for termination if discovered at a later date. Do not omit any item. Reasonable accommodation is available to permit applicants to participate in the job application process. Please advise of any accommodation you feel is needed.

POSITION _____ DATE _____
NAME Last _____ First _____ MI _____
ADDRESS Street _____ City _____ State _____ Zip _____
PHONE _____ CELL _____ EMAIL _____

Have you ever applied for a position with the Chico Public Library, Inc. (CPL) before? YES NO
Have you ever been employed by CPL? YES NO
Are you currently employed? YES NO
If yes, may we contact your current employer? YES NO
Are you eligible to work in the United States? YES NO
(Proof of eligibility will be required upon employment)
Are you at least 18 years of age? YES NO
When would you be available to start work? _____

EDUCATIONAL INFORMATION

Name of Institution (include city, state) Did you graduate? Degree/Diploma/GED Major/Minor

HIGH SCHOOL	YES	NO		
COLLEGE/TECHNICAL/VOCATIONAL	YES	NO		
COLLEGE/TECHNICAL/VOCATIONAL	YES	NO		

Indicate if you can speak, read and/or write Spanish and to what proficiency level:

REFERENCES

List three personal references, not a former employer or a relative, who have known you for at least three years.

NAME	EMAIL	TELEPHONE	YEARS KNOWN
1.			
2.			
3.			

EMPLOYMENT EXPERIENCE

Begin with the current or most recent employer. List all work experience for the past five years. Attach additional sheets if necessary.

EMPLOYER	PHONE	DATES EMPLOYED
ADDRESS		SUPERVISOR
CITY STATE ZIP		SUPERVISOR'S POSITION
JOB TITLE		MAY WE CONTACT?
WORK PERFORMED		STARTING SALARY
REASON FOR LEAVING		FINAL SALARY

EMPLOYER	PHONE	DATES EMPLOYED
ADDRESS		SUPERVISOR
CITY STATE ZIP		SUPERVISOR'S POSITION
JOB TITLE		MAY WE CONTACT?
WORK PERFORMED		STARTING SALARY
REASON FOR LEAVING		FINAL SALARY

EMPLOYER	PHONE	DATES EMPLOYED
ADDRESS		SUPERVISOR
CITY	STATE	ZIP
JOB TITLE		SUPERVISOR'S POSITION
WORK PERFORMED		MAY WE CONTACT?
REASON FOR LEAVING		STARTING SALARY
		FINAL SALARY

SKILLS AND QUALIFICATIONS

Summarize training, special job-related skills, qualifications, licenses and/or certifications acquired that may qualify you for the position for which you are applying.

State any additional information you feel may be helpful to us in considering your application.

NOTE TO APPLICANT:

Do not answer this question unless you have been informed about the requirements of the job for which you are applying.

Are you capable of performing the essential functions of the job for which you have applied with reasonable accommodation?

YES NO

APPLICANT STATEMENT

Please read the following statement carefully and indicate your understanding and acceptance by signing in the space provided.

I certify that all information I have provided in order to apply for and secure work with the Chico Public Library, Inc. (CPL) is true, complete and correct. I understand that false, misleading or omitted information provided in any application or interview(s) may be sufficient cause for cancellation of this application and/or separation from CPL service if I become employed. I further understand that any offer of employment tendered to me is contingent upon my agreement to abide by all rules, regulations, and policies of the CPL. I am aware that my application is subject to the Texas Public Information Act and could be released as a public document.

I understand that the CPL is an Equal Opportunity Employer and does not discriminate in employment decisions on any unlawful basis. No question on this application is used for the purpose of limiting or excusing any applicant from considerations for employment on a basis prohibited by applicable local, state, or federal law.

I understand a criminal background check may be conducted as a condition of employment with the CPL.

I authorize the CPL the right to investigate all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby release the employer and its representatives from any and all liability for seeking such information and all other persons, corporations or organizations for furnishing such information.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Chico Public Library, Inc. is "at will," which means that I may resign at any time and the CPL may discharge me at any time with or without cause and without prior notice. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized official of the Chico Public Library, Inc.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant

Date

This application will be held for a period of three months from the date of receipt and may be extended only by written request.