

## BUENA PARK LIBRARY DISTRICT

7150 La Palma Avenue • Buena Park, CA 90620 • PH 714-826-4100 • FAX 714-826-5052

## **APPLICATION FOR EMPLOYMENT**

Answer all questions accurately and completely. Incomplete applications may be disqualified.

Position Appl	ying For:			aiiileu.	Date	<b>:</b>			
Name (Last, I	First Middle	)				l			
Address (Stre	eet address,	City, State, & Zip)							
Dhana Numb			Email Address:				In	ata Availabla ta Ctarti	
Phone Number:			Email Address.				Date Available to Start:		
Are you over			No						
-			gal right to work in the U						
For jobs when both? $\square$ Yes		a requirement, you v	vill be required to provide	e a valid (	CA driver's license	and proof of	auto insurance. Wil	I you be able to provide	
				EDUC	ATION				
High School	Name				Location		Years Completed		
	Name				Location		Years Completed	Type of Degree	
College									
/University									
Other School	s or Training	. List Name, Locati	on, Subjects Studied, Ce	ertificates	Received, and An	y Other Perti	nent Data. Use a se	parate sheet if necessary:	
Computer Ex	perience. Be	specific. Use a sep	arate sheet if necessary	:					
Do you type?	If yes, app	oximate words per r	minute: Ar	e you flue	ent in a foreign lan	guage? If ye	es, which language?		
□ Yes WPM □ No					Yes □ No				
	l ist t	he <b>snecific</b> hours v	<b>p</b> ou are currently available		ABILITY	week Exan	nnle: 9:30 a.m. to 1:0	00 n m	
IVIONO	day Tuesday Wednesday		ay	Thursday		Friday	Saturday		
		Liet throo	<b>F</b> people who are not relat		ENCES	dae of your a	ualifications		
Full Name and Title				Employer			ne Number	Relationship	

Full Name and Title	Employer	Phone Number	Relationship

## WORK EXPERIENCE

List all jobs held in the last 10 years beginning with the most recent. Attach an additional sheet if necessary. **Employer** Type of Business Phone Number Brief Description of Work Address Job Title Supervisor's Name Dates of Employment May we contact this employer? ☐ Yes ☐ No Started Left Reason for Leaving Employer Type of Business Phone Number Brief Description of Work Address Job Title Supervisor's Name Dates of Employment May we contact this employer? ☐ Yes ☐ No Start Left Reason for Leaving Type of Business Phone Number Brief Description of Work Employer Address Job Title Supervisor's Name Dates of Employment May we contact this employer? ☐ Yes ☐ No Start Left Reason for Leaving Employer Type of Business Phone Number Brief Description of Work Address Job Title Supervisor's Name Dates of Employment May we contact this employer? ☐ Yes ☐ No Start Left Reason for Leaving Have you ever been fired or forced to resign from a position? If yes, please explain: □ Yes □ No Do you have any physical condition which may limit your ability to perform the job applied for? If yes, please explain what can be done to reasonably accommodate your limitation: ☐ Yes □ No Are you a CalPERS RETIRED Annuitant? Are you now or have you ever been a member of CalPERS? Yes ■ No ☐ Yes ■ No READ THIS STATEMENT BEFORE SIGNING: I hereby certify that the information supplied on this Application is true and correct to the best of my knowledge. I understand that any misrepresentation, falsification or omission of information on this Application may result in my failure to receive an offer of employment, or if I am hired, may result in discharge from employment. Unless otherwise noted, I agree that any statement I have made herein may be verified by the District. Verification will include contact with my former employers. I understand that all offers of employment are conditional based upon the successful completion of a medical examination (which will include a drug screening), background and reference checks. The Buena Park Library District is an equal opportunity employer and, therefore, abides by the principles of equal opportunity to all individuals regardless of age, gender, ethnic background, personal, religious or political beliefs, physical handicaps or personal life styles. Signature Date