Locust Valley Library Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age or marital status, the presence of a non-job related handicap, or any other legally protected status.

	First Name: City		_Date: _Middle Name:		
			Middle Name:		
	City	State:			
Email:			Zip:		
			_		
years of age, can yo work?	u provide required proof	Yes	No		
May we contact your present employer?			No		
Visa or Immigration or immigration state d you be available for convicted of a misc necessarily disqualify	o Status? Sus will be required upon en Or work? demeanor or felony? y an applicant from employ	Yes vment)	No		
Indicate any for	reign languages you can sp	oeak, read and/or w	rite.		
FLUENT	GOOD		FAIR		
		elated to you and are	e not previous employe		
	from lawfully become visa or Immigration state of you be available for a convicted of a mison necessarily disqualify notes. Indicate any for FLUENT	from lawfully becoming employed in this Visa or Immigration Status? or immigration status will be required upon en d you be available for work? convicted of a misdemeanor or felony? necessarily disqualify an applicant from employ n: Indicate any foreign languages you can sp FLUENT GOOD REFERENCES	from lawfully becoming employed in this Visa or Immigration Status?Yes or immigration status will be required upon employment) d you be available for work?Yes necessarily disqualify an applicant from employment) Indicate any foreign languages you can speak, read and/or will follow the state of 3 references who are not related to you and are		

EMPLOYMENT EXPERIENCE

Employer:						. Pł	none Nu	mber:				
Address:						Jo	b Title:					
ites Employed: From: To:				Supervisor:								
Reason for Leaving:												
Work Performed:												
Employer:								mber:				
Address:						_ Jo	b Title:					
Dates Employed: From:To:					Supervisor:							
Reason for Leaving:												
Work Performed:												
Employer:						Pł	none Nu	mber:				
Address:						_ Jo	b Title:					
Dates Employed: From:	То:				Supervisor:							
Reason for Leaving:												
Work Performed:												
Education												
	High School				Undergraduate College				Graduate/Professional			
School Name & Location												
Years Completed Diploma/Degree	9	10	11	12	1	2	3	4	1	2	3	4
Course of Study												
Describe any specialized train	ing/skille	•										

Additional information you reel m	be neighble to us in considering your application:
•	s true and correct, and understand that providing false information on this tion not being considered. Additionally, if it is determined after I begin with the se, I may be terminated.
Signature	 Date