



21 West Nicolet Street
 Banning, CA 92220
 951.849.3192 tel.
 951.849.6355 fax
www.banninglibrarydistrict.org

EMPLOYMENT APPLICATION

POSITION(S) APPLIED FOR		APPLICATION DATE	
LAST NAME	FIRST NAME	MIDDLE INITIAL	
ADDRESS	CITY	STATE	ZIP
TELEPHONE	DRIVERS LICENCE NO. (IF APPLICABLE)		
DATE AVAILABLE FOR WORK	EMPLOYEMENT TYPE <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Co-op		
Were you previously employed by this organization? <input type="checkbox"/> Yes, Date(s)		Department/Position <input type="checkbox"/> No	
List any relatives or friends Working for this organization:		Name	Relationship
		_____	_____
		_____	_____
WORK EXPERIENCE			
FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		RESPONSIBILITIES	
SUPERVISOR AND TITLE		_____	REASON FOR DEPARTURE
FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		RESPONSIBILITIES	
SUPERVISOR AND TITLE		_____	REASON FOR DEPARTURE
FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		RESPONSIBILITIES	
SUPERVISOR AND TITLE		_____	REASON FOR DEPARTURE
FROM	TO	COMPANY NAME AND ADDRESS	TELEPHONE
POSITION HELD		RESPONSIBILITIES	
SUPERVISOR AND TITLE		_____	REASON FOR DEPARTURE



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May we contact the above employers? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", indicate which one(s) you do not wish us to contact.					
LIST RELEVANT SKILLS AND ABILITIES					
EDUCATION					
NAME	ADDRESS	YEARS COMPLETE	DID YOU GRADUATE	COURSE OF STUDY	
HIGH SCHOOL					
COLLEGE				MAJOR	DEGREE
OTHER				MAJOR	DEGREE
PROFESSIONAL REFERENCES					
NAME AND ADDRESS		TELEPHONE		YEARS KNOWN	
NAME AND ADDRESS		TELEPHONE		YEARS KNOWN	
NAME AND ADDRESS		TELEPHONE		YEARS KNOWN	
MISCELLANEOUS INFORMATION					
Can you verify your legal rights to work in the U.S. by providing a birth certificate, proof of U.S. Citizenship, or by some other means? <input type="checkbox"/> Yes <input type="checkbox"/> No If you are under 18 are you able to furnish a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> NO Are you able to perform the job(s) for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<p>I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.</p> <p>I authorize investigation of all statements contained herein and the references listed above, to give you any and all information, concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.</p> <p>Signature of Applicant _____ Date _____</p>					
Employment is at will of BANNING LIBRARY DISTRICT. Employment may be terminated at any time with proper notification by either party. BANNING LIBRARY DISTRICT does not discriminate on the basis of sex, race, national origin, creed, age, marital status or disability in its programs, services or employment practices.					
DO NOT WRITE BELOW- FOR COMPANY USE ONLY					
Interview? <input type="checkbox"/> NO <input type="checkbox"/> YES			Acceptable for Employment? <input type="checkbox"/> Yes <input type="checkbox"/> No		
DATE _____		TIME _____		DEPT.	MANAGER
Interviewed By _____				OCCUPATION	RATE