



# Clifton Park-Halfmoon Public Library Employment Application

Position(s):

Date (mm/dd/yyyy):

Referral source:

Name of source (if applicable):

Ad

Employee

Walk-in

Last Name:

First Name:

Middle initial:

Street address:

City:

State:

Zip code:

Home phone:

Cell phone:

E-mail:

Best time to call:

Morning

Afternoon

Evening

Best phone number to call:

Home

Cell

Work

Have you applied here before?

Yes

No

If yes, give date:

Have you been employed here before?

Yes

No

If yes, give date:

If you are under 18, can you furnish a work permit?

Yes

No

Are you legally eligible for employment in this country?

Yes

No

### Proof of US citizenship or immigration status will be required upon employment

Type of employment desired:

Full-time

Part-time

Date available for work:

Are you on lay-off and subject to recall?

Yes

No

Are you able to meet the attendance requirements of the position?

Yes

No

Have you been convicted of a felony in the last seven (7) years?

Yes

No

(Such conviction may be relevant if job-related, but does not bar you from employment.)

### Availability for Shifts

Put an X in the boxes below to indicate hours you are available each day.

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8:30 am - 9:00 am							Closed
9:00 am - 10:00 am							Closed
10:00 am - 11:00 am							Closed
11:00 am - 12:00 pm							
12:00 pm - 1:00 pm							
1:00 pm - 2:00 pm							
2:00 pm - 3:00 pm							
3:00 pm - 4:00 pm							
4:00 pm - 5:00 pm							
5:00 pm - 6:00 pm						Closed	Closed
6:00 pm - 7:00 pm					Closed	Closed	Closed
7:00 pm - 8:00 pm					Closed	Closed	Closed
8:00 pm - 9:00 pm					Closed	Closed	Closed

## Education

---

Please list the last three (3) schools attended, starting with the most recent.

School name/location:

Years completed:

Degree / diploma:

Major:

Minor:

---

School name/location:

Years completed:

Degree / diploma:

Major:

Minor:

---

School name/location:

Years completed:

Degree / diploma:

Major:

Minor:

---

## Employment

---

Please list your last two (2) employers, assignments or volunteer activities, starting with the most recent. Include military experience. Explain any gaps in employment in comments section below.

Employer:

Address:

Phone:

Dates employed:  
(mm/yyyy - mm/yyyy)

State job title and summarize nature of your work:

Name and title of supervisor:

Reason for leaving:

May we contact for reference                      Yes              No              Later

---

Employer:

Address:

Phone:

Dates employed:  
(mm/yyyy - mm/yyyy)

State job title and summarize nature of your work:

Name and title of supervisor:

Reason for leaving:

May we contact for reference                      Yes              No              Later

---

## References

---

List name and telephone number of three (3) business/work references who are not related to you and are not previous supervisors. If not applicable, list three (3) school or personal references who are not related to you.

Name

Phone:

Years known:

---

Name

Phone:

Years known:

---

Name

Phone:

Years known:

---

List any additional information you'd like us to consider:

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application an/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.

This application is current for only 120 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

Signature of applicant:

Date (mm/dd/yyyy):

Updated July 2022