

Grand County Library District - Application for Employment						
PERSONAL INFORMATION						
Name:						
Mailing Address:	Mailing Address:					
Physical Address:						
1. Home Phone: E-Mail:						
2. Mobile Phone: Preferred Contact: Email Phone 1 Phone 2					Phone 1 Phone 2	
Are you prevented from being lawfully employed due to VISA or immigration status? Yes No						
Have you ever been convicted	of a felony? Yes	No 🗌				
EMPLOYMENT DESIRED						
Position(s) Applying For:						
Date you can Start:	Date you can Start: Salary Desired:			Number of	Hrs per Week:	
Have you ever worked or filed	an application with us	hoforo? V	/os 🗍	No 🗌		
How did you learn about us?	an application with us	belole: 1	es	NO		
Education						
	Course o	f Study	Years Co	ompleted	Diploma/Degree Earned?	
High School						
College						
Graduate						
Other						
	I					
What are your Hobbies, Interests, Etc.?						

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EMPLOYMENT EXPERIENCE							
Start with your present or	r last job				Dates Er	mployed	
Employer:	·			From:		To:	
Address:						I	
Telephone:			Supervisor's E	-Mail:			
Job Title:			Supervisor:				
Hourly Rate or Salary:	Starting:		Final:				
Work Performed:							
Reason for Leaving:							
					Dates Er	mployed	
Employer:				From:		To:	
Address:				•			
Telephone:			Supervisor's E	-Mail:			
Job Title:			Supervisor:				
Hourly Rate or Salary:	Starting:		Final:				
Work Performed: Reason for Leaving:							
Reason for Leaving.					Dates Er	mployed	
Employer:				From:	Dates El	To:	
Address:				110111.		10.	
			Cupomison's F	· Mail.			
Telephone: Job Title:			Supervisor's E Supervisor:	-IVIdII.			
Hourly Rate or Salary:	Starting:		Final:				
Work Performed:							
Reason for Leaving:							
					Dates Er	mployed	
Employer:				From:		To:	
Address:							
Telephone:			Supervisor's E	-Mail:			
Job Title:			Supervisor:				
Hourly Rate or Salary:	Starting:		Final:				
Work Performed:	•						
Reason for Leaving:							
3							
Which of these jobs did you like best?							
What did you like most about your favorite job?							

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Describe any specialized training, skills, activities, etc						
PERSONAL/PROFESSIONAL REFERENCES						
Name:	Phone/E-mail:	Yea	rs Known:			
Name:	Phone/E-mail:	Voa	rs Known:			
Name.	Phone/E-mail.	fea	is kilowii.			
Name:	Phone/E-mail:	Yea	rs Known:			
	APPLICANT'S STAT					
I certify that all the information submitted by me on this application is true and complete, and I understand that if						
any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if						
employed, my employment may be terminated. In consideration of my employment, I agree to follow the company's policies and procedures, and I acknowledge that any employment relationship with this organization is "at will",						
meaning that my employment can be terminated, with or without cause, and with or without notice, at any time, at						
either my or the company's option. I also understand and agree that the terms and conditions of my employment						
may be changed, with or without cause, and with or without notice, at any time by the company.						
As part of the application process, I will consent to a criminal background check.						
Applicant Signature			Date:			