

Craven- Pamlico-Carteret Regional Library

Application for Employment

Thank you for applying for employment with our library system.

Some important points:

- Submission of this application does not guarantee employment.
- This full application must be submitted. Additional information (e.g. a resume) may also be included.
- The completed application should be submitted to the Librarian at the library location where you are applying to work.
- Please read over the application carefully, and print your response.
- In compliance with the Immigration Reform and Control Act of 1986, you will be required to provide approved documentation that verifies your right to work in the United States in the event you are offered and accept employment with the CPC Regional Library.
- We maintain Applications for Employment for two (2) years from the date of submission.

CRAVEN-PAMLICO-CARTERET REGIONAL LIBRARY

Application for Employment ----- PLEASE PRINT

Our policy is to provide Equal Employment Opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date of Application:			
Contact Information			
First Name:	Middle Name:	Last Name:	
Date of Birth:	(Applicants under	r 18 years of age will need a Work Permit i	f hired)
Street Address:			
Mailing Address:			
		ZIP Code:	
Home Phone:	Cell Phone:	Work Phone:	
Email Address:			
required to provide docur Yes No	mentation.)		
Have you ever been conv	victed of a felony? (This will not	t necessarily affect your application.)	
Have you ever been conv Yes No	victed of a felony? (This will not	t necessarily affect your application.)	
Yes No	•	t necessarily affect your application.)	
Yes No If yes, please describe co <u>Employment Desired</u>	onditions.		
Yes No If yes, please describe co <u>Employment Desired</u> Position:	•	t necessarily affect your application.)	
Yes No If yes, please describe co <u>Employment Desired</u> Position:	onditions.		
Yes No If yes, please describe co Employment Desired Position: Referral Source: Have you ever applied for	onditions.	Library:	No
Yes No If yes, please describe co Employment Desired Position: Referral Source: Have you ever applied fo When?	onditions.	Library:	
Yes No If yes, please describe co Employment Desired Position: Referral Source: Have you ever applied fo When? Have you ever been emp	or employment with CPC Region	Library:	No
Yes No If yes, please describe co Employment Desired Position: Referral Source: Have you ever applied fo When? Have you ever been emp When?	onditions.	Library:	No
Yes No If yes, please describe co Employment Desired Position: Referral Source: Have you ever applied fo When? Have you ever been emp	onditions.	Library:	No

EDUCATION

	School Name/Location	Year Graduated	Major	Degree
High School				
College				
College				
Post-College				
Other Training				

Please list membership(s) in professional, honorary, or technical societies:

In addition to your work history, are there any other skills, qualifications, or experience that we should consider?

Work History (Please list your most recent job first)

Company Name:		
Date Started:	Starting Wage/Salary:	Starting Position:
Date Ended:	Ending Wage/Salary:	Ending Position:
Full Time: Years Mor	nths	
Part Time: Years Mor	ths If part tim	ne, number of hours worked per week:
May we contact your Supervisor?	Yes No	
Supervisor Information:		
Name:		Phone number:
Emoil		
Summary of Duties:		
Reason for leaving		
Company Name		
Company Name: Location:		
Date Started:	Starting Wage/Salary:	Starting Position:
Date Ended:	Ending Wage/Salary:	Ending Position:
Full Time: Years Mor		
Part Time: Years Mor		ne, number of hours worked per week:
		ic, number of nours worked per week.
May we contact your Supervisor?	Yes No	
Supervisor Information:		
Name:		Phone number:
Email:		
Summary of Duties:		

Company Name:			
Leastion			
Date Started:	Starting W	age/Salary:	Starting Position:
Date Ended:	Ending Wa	nge/Salary:	Ending Position:
Full Time: Years	Months		
Part Time: Years	Months	If part time	e, number of hours worked per week:
May we contact your Supervis	or? Yes	No	
Supervisor Information:			
Name:			Phone number:
Email			
Summary of Duties:			
Reason for leaving			
Company Name:			
Location:			
Date Started:		age/Salary:	Starting Position:
Date Ended:	Ending Wa	ge/Salary:	Ending Position:
Full Time: Years			
Part Time: Years	Months	If part time	e, number of hours worked per week:
May we contact your Supervis	or? Yes	No	
Supervisor Information:			
Name:			Phone number:
Erre oile			
Summary of Duties:			

Company Name:		
Location:		
Date Started:	Starting Wage/Salary:	Starting Position:
Date Ended:	Ending Wage/Salary:	Ending Position:
Full Time: Years Mor	nths	
Part Time: Years Mor	nths If part tim	e, number of hours worked per week:
May we contact your Supervisor?	Yes No	
Supervisor Information:		
Name:		Phone number:
Email:		
Summary of Duties:		

Reason for leaving

Library Experience and/or Training:

References

List three (3) references, not related to you and not supervisors previously listed in this application, who have known you for more than one year.

Name:	Phone:	Years Known:
Address:		
Email Address:		
Name:	Phone:	Years Known:
Address		
Email Address:		
Name:	Phone:	Years Known:
Address:		
Email Address:		

Please Read Before Signing:

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record. I agree that CPC Regional Library and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with CPC Regional Library, I will comply with all rules and regulations as set by CPC Regional Library in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to CPC Regional Library that verifies my right to work in the United States on the first day of employment. I have received from CPC Regional Library a list of the approved documents that are required.

I understand that employment at this company is "at will," which means that either I or CPC Regional Library can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Your Signature: _____

Date_____

Immigration Reform and Control Act Requirement

In compliance with the Immigration Reform and Control Act of 1986, you are required to provide approved documentation that verifies your right to work in the United States prior to your employment with CPC Regional Library. Please be prepared to provide us with the following documentation in the event you are offered and accept employment with our company.

Any one (1) of the following: (These establish both identity and employment authorization.)

- 1. U.S. Passport.
- 2. Certificate of U.S. Citizenship (issued by USCIS).
- 3. Certificate of Naturalization (issued by USCIS).
- 4. Resident alien card or other alien unexpired endorsement card, with photo or other approved identifying information which evidences employment authorization.
- 5. Unexpired foreign passport with unexpired endorsement authorizing employment.

Or one (1) from List A and one (1) from List B:

List A (These establish employment authorization.)

- 1. Social Security card.
- 2. Birth Certificate or other documentation that establishes U.S. nationality or birth.
- 3. Other approved documentation.

List B

1. Driver's license or similar government identification card with photo or other approved identifying information.

2. Other approved documentation of identity for applicants under age 16 or in a state that does not issue an I.D. card (other than a driver's license).