



# APPOMATTOX REGIONAL LIBRARY SYSTEM

## EMPLOYMENT APPLICATION

209 East Cawson Street  
Hopewell, Virginia 23860-8414

Phone: 804-458-6329

Fax: 804-452-0909

Please Type or Print Legibly

A

### GENERAL INFORMATION

1. Position Title: \_\_\_\_\_  
(One per Application)

2. Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Optional Unless Under 18 Years of Age)

3. Full Name: \_\_\_\_\_  
Last First Middle

4. Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip Code

5. Home Telephone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

6. Have you previously been employed by the Appomattox Regional Library? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, Position Held: \_\_\_\_\_ Dates of Employment \_\_\_\_\_

7. If position requires driving:  
Valid Driver's License Number: \_\_\_\_\_ Issuing State \_\_\_\_\_ Expiration Date: \_\_\_\_\_

8. Are you legally eligible for employment in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

9. Are you willing to accept employment which requires you to travel? Yes \_\_\_\_\_ No \_\_\_\_\_

10. Please list geographical locations in which you are willing to work.  
\_\_\_\_\_  
\_\_\_\_\_

11. Are you available weekends, holidays, and varied shifts? Yes \_\_\_\_\_ No \_\_\_\_\_

12. When will you be available to start work? Date: \_\_\_\_\_

13. Have you ever been convicted of a misdemeanor; felony; or traffic violations, excluding those before your 18th birthday?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please list all dates and explain)  
\_\_\_\_\_  
\_\_\_\_\_

14. List any relatives currently working for the Library or serving on the Board of Trustees.  
\_\_\_\_\_  
\_\_\_\_\_

**B**

**EMPLOYMENT HISTORY** (Begin with last or most recent paid, military, or voluntary experience.)

\*\*\*\*\*

Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Telephone \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_  
May we contact employer: Yes \_\_\_\_\_ No \_\_\_\_\_  
Job Duties \_\_\_\_\_

Position Held \_\_\_\_\_  
Dates Employed \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Number of Persons Supervised \_\_\_\_\_  
Name if different from Present \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Telephone \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_  
May we contact employer: Yes \_\_\_\_\_ No \_\_\_\_\_  
Job Duties \_\_\_\_\_

Position Held \_\_\_\_\_  
Dates Employed \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Number of Persons Supervised \_\_\_\_\_  
Name if different from Present \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Telephone \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_  
May we contact employer: Yes \_\_\_\_\_ No \_\_\_\_\_  
Job Duties \_\_\_\_\_

Position Held \_\_\_\_\_  
Dates Employed \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Number of Persons Supervised \_\_\_\_\_  
Name if different from Present \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

USE BLANK SHEET IF MORE SPACE IS REQUIRED.  
ARLS EMPLOYMENT APPLICATION

**C** EDUCATION

Do you have a high school diploma? Yes \_\_\_\_\_ No \_\_\_\_\_ Date Received \_\_\_\_\_

If no, highest grade completed (1st - 12th) \_\_\_\_\_

Name and address of high school attended. \_\_\_\_\_

Do you have a GED? Yes \_\_\_\_\_ No \_\_\_\_\_ Date Received \_\_\_\_\_

Post High School Education:

Name and location of institution	Degree Received	Major/Specialty	Dates
----------------------------------	-----------------	-----------------	-------

\_\_\_\_\_

\_\_\_\_\_

List certification or licenses that you possess:

\_\_\_\_\_

\_\_\_\_\_

SKILLS

**D** Keyboarding WPM \_\_\_\_\_ Personal Computer \_\_\_\_\_ Shorthand \_\_\_\_\_

Other Office Equipment \_\_\_\_\_

\_\_\_\_\_

Other skills (software, training, language): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

REFERENCES (List three persons not related to you who know your qualifications.)

<b>E</b>	Name	Address	Telephone	Relationship
----------	------	---------	-----------	--------------

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

CERTIFICATION

**F** hereby certify that all entries and all attachments are true and complete. I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in the services of the Appomattox Regional Library System. I understand that all information on this application is subject to verification and I consent to references and former employers and educational institutions listed being contacted regarding this application. I further authorize the Library to rely upon and use as it sees fit information received from such contacts.

Date \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

ARLS EMPLOYMENT APPLICATION

STATE AND FEDERAL EMPLOYMENT REPORTING INFORMATION

The information listed below will NOT be used for making employment decisions and will NOT be kept with your application for employment. It is needed to analyze and assure compliance with State and Federal equal employment opportunity laws and related reporting requirements. Federal laws prohibit employment discrimination on the basis of race, color, sex, age, handicap, national origin, or religion.

Position Title \_\_\_\_\_ Date \_\_\_\_\_  
Fulltime \_\_\_\_\_ Part-time \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Business Telephone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Check: Male \_\_\_\_\_ Female \_\_\_\_\_ Check: Handicapped Yes \_\_\_\_\_ No \_\_\_\_\_

Check Race/Ethnic Group

- \_\_\_\_\_ White
- \_\_\_\_\_ Black
- \_\_\_\_\_ Hispanic
- \_\_\_\_\_ Asian and Asian American
- \_\_\_\_\_ American Indian
- \_\_\_\_\_ Other \_\_\_\_\_

Check Highest Level of Education Completed

- \_\_\_\_\_ Attended High School
- \_\_\_\_\_ High School Diploma
- \_\_\_\_\_ Attended College
- \_\_\_\_\_ Associate Degree
- \_\_\_\_\_ Bachelor's Degree
- \_\_\_\_\_ Master's Degree
- \_\_\_\_\_ PH.D or Professional Degree

Check Status

- \_\_\_\_\_ Military
- \_\_\_\_\_ Active Duty
- \_\_\_\_\_ Active Reserve

Check Referral Source

- \_\_\_\_\_ Newspaper
- \_\_\_\_\_ Employment Agency
- \_\_\_\_\_ Library Bulletin Board

\_\_\_\_ National Guard  
\_\_\_\_ Veteran \_\_\_\_\_  
\_\_\_\_ Not Applicable

\_\_\_\_ Minority or Women's Group  
\_\_\_\_ Friend or Relative  
\_\_\_\_ National Publication  
\_\_\_\_ Other \_\_\_\_\_