



YONKERS PUBLIC LIBRARY - An Equal Opportunity Employer

EMPLOYMENT APPLICATION

Last Name			First Name			Middle Name			Date: _____
Address						Zip Code			Are you a U.S. citizen? YES <input type="checkbox"/> NO <input type="checkbox"/>
Email Address						Telephone			If no, do you have the legal right to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
									Are you over 18 years of age? YES <input type="checkbox"/> NO <input type="checkbox"/>

Are you a resident of Yonkers? YES <input type="checkbox"/> NO <input type="checkbox"/>	For what position are you applying? Clerk <input type="checkbox"/> Librarian <input type="checkbox"/> Computer Assistant <input type="checkbox"/> Custodian <input type="checkbox"/> Shelving Page <input type="checkbox"/>
If yes, for how long? _____	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Date you can begin work: _____

EDUCATION		Special skills applicable to the position you are seeking:
High school (name & grade): _____	College: _____	_____
Type of course: _____	Dates attended or expect to attend: _____	_____
Date of graduation: _____ Special honors: _____	Degree received: _____ Honors: _____	_____
Special training: _____	Library school: _____	_____
Degree received: _____	Dates attended: _____	_____
If you have a New York Public Librarian's Certificate, give number and type: _____		_____

WORK EXPERIENCE (Give present or last position first) Include job-related military experience; Attach resumé or separate sheet for additional employment information

Name of employer or company	Address	Name & title of supervisor	Reason for leaving
From: To:		Position or title	
Name of employer or company	Address	Name & title of supervisor	Reason for leaving
From: To:		Position or title	
Name of employer or company	Address	Name & title of supervisor	Reason for leaving
From: To:		Position or title	
Name of employer or company	Address	Name & title of supervisor	Reason for leaving
From: To:		Position or title	

May we contact your present employer or supervisor? YES NO

PERSONAL REFERENCES: (Do not include relatives) These persons should be familiar with applicant's qualifications for employment:

NAME	ADDRESS	CITY & STATE	PHONE
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

I certify that the facts set forth in this application are true and complete, to the best of my knowledge

Signature of applicant: _____ Interviewed by: _____ Date: _____

Comments of interviewer: _____