

Northern Waters Library Service
3200 East Lakeshore Drive
Ashland, WI 54806
715-682-2365 x 10
e-mail smachones@northernwaters.org

Employment Application Date _____

Northern Waters Library Service is an equal opportunity employer, and fully subscribes to the principles of Equal Employment Opportunity. It is the policy of Northern Waters Library Service to provide employment, compensations, and other benefits related to employment, based on qualifications - without regard to race, color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal or state law. As an equal opportunity employer, Northern Waters Library Service intends to comply fully with all federal and state laws, and the information requested on this application will not be used for any purpose prohibited by law. Applicants who have disabilities may request any needed accommodation.

Please print clearly, and be sure to sign this application.

Name: _____
Last First MI

Social Security Number: _____

Address: _____
Street City State Zip

Home Phone: _____ Business Phone: _____

e-mail _____

If the job requires unusual hours, weekends or night work, and accommodations are made for your religious needs, can you accept the position? Yes ___ No ___

Do you have a valid Wisconsin Driver's License and car insurance?
___ Yes ___ No

Have you filed an application with us before? Yes ___ No ___

Employment Desired

Position(s) applied for _____

Full time

Education _____

	Name and Location of School	Number of Years Completed	Did you graduate	Course of Study	Degree
High School					
College					
Other					
Other					

List any special skills or qualifications, which you feel, are relevant to the job for which you are applying:

Employment History

Please give accurate and complete information. Start with present or most recent employer:

Company name
Telephone number
Address
Employed from / / to / /
Name of supervisor
Hourly pay: Start Last
Position and responsibilities:
Reason for leaving:

Company name
Telephone number
Address
Employed from / / to / /
Name of supervisor
Hourly pay: Start Last
Position and responsibilities:
Reason for leaving:

Company name
Telephone number
Address
Employed from / / to / /
Name of supervisor
Hourly pay: Start Last
Position and responsibilities:
Reason for leaving:

References

May we communicate with your present employer? Yes No

Please list three references:

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

Please read the following statements carefully before you sign your name.

I HEREBY CERTIFY that the answers given by me to the above questions and statements are true and correct and hereby authorize you to contact references, past or present employers (present employers upon applicant permission only), persons, schools, law enforcement agencies and any other sources of information which may be relevant to my application for employment. It is understood and agreed that any misrepresentation, false statement, or omissions by me in the application will be sufficient reason for rejection of my application or for dismissal at any time during my employment, without liability to Northern Waters Library Service. I have read, understood and agree to the above statement. (Please initial here.) _____

I further understand that no representative of Northern Waters Library Service has the authority to enter into any agreement for employment for any specified period of time and that Northern Waters Library Service is not guaranteeing employment for anyone. No employment contract is created by virtue of my being hired by Northern Waters Library Service. I have read, understand and agree to the above statement. (Please initial here) _____

I understand that false information on this application will result in immediate termination. (Please initial here) _____

Signature Date