

**Tama Public Library  
401 Siegel Street  
Tama, IA 52339  
641-484-4484**

**APPLICATION FOR EMPLOYMENT**

Pre-employment questionnaire An equal opportunity employer

**Personal Information:**

Date: \_\_\_\_\_

Name

Last

First

Middle

Social Security Number

Present Address:

Street

City

State

Zip

Permanent Address:

Street

City

State

Zip

Phone No: \_\_\_\_\_

Are you 18 years or older? ( ) Yes ( ) No

Are you either a US citizen or an alien authorized to work in the United States? ( ) Yes ( ) No

**Employment Desired**

Position \_\_\_\_\_

Start Date \_\_\_\_\_

Wage Desired \_\_\_\_\_

Are you employed now? \_\_\_\_\_

If so, may we contact your present employer? \_\_\_\_\_

Ever applied to this Library before? \_\_\_\_\_

When? \_\_\_\_\_

Referred by: \_\_\_\_\_

<b>Education</b>	Name of School/Location	No of years	Did you Graduate?	Subjects studied
Grammar School				
High School				
College				
Trade or Business				

**General:**

Subjects of Special Study or Research Work

Special Skills

Activities: (Civic, Volunteer, etc)

US Military or

Naval Service \_\_\_\_\_

Rank \_\_\_\_\_

Present membership in

National Guard or Reserves \_\_\_\_\_

Continued on next Page:

**Former Employers** List below last three employers, starting with last one first

Date: Month + Year	Name/Address of employer	Salary	Position	Reason for Leaving
From: To:				
From: To:				
From: To:				

Which of these jobs did you like best?

What did you like about this job?

**References:** Give the names of 3 persons not related to you, whom you have known at least one year

Name	Address	Business	Years Acquainted
1			
2			
3			

Signature of Applicant:

In case of emergency Notify

Name

Address

Phone Number

A Pre-employment background check is required for all new employees at the Tama Public Library

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause. Tama City employees are "Employees At Will".

Date \_\_\_\_\_

Signature \_\_\_\_\_

Do not write below this line

Interviewed by: \_\_\_\_\_

Date \_\_\_\_\_

Remarks:

Neatness \_\_\_\_\_

Ability \_\_\_\_\_

Hired: ( ) Yes ( ) No

Position \_\_\_\_\_

Dept: \_\_\_\_\_

Salary/Wage \_\_\_\_\_

Date reporting to work: \_\_\_\_\_

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

Director

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

Board President

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

Board Vice-President

This form has been designed to strictly comply with

State and Federal fair employment practice laws prohibiting employment discrimination. This application for employment form is used for general use throughout the United States.