



22072 County Route 190
Watertown, NY 13601
315-782-5540
ncls.org

APPLICATION FOR EMPLOYMENT

The North Country Library System is an equal opportunity employer. NCLS does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date _____

Address _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

Are you eligible to work in the U.S? Yes No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)
 Yes No

Have you ever been terminated from employment or asked to resign by an employer?
 Yes No

If yes, please provide company names and details _____

Date you can start _____ Hourly rate/Salary desired _____

Position desired _____

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

Are you currently employed? If so, may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? Walk-In Advertisement Referral Other



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Have you ever worked for this company before? ___Yes ___No

If yes, please provide details_____

Do you know anyone who works for our company? Yes No If yes, who? _____

EDUCATION	Name and location of school	Degree Received	Subjects studied/Major
High School			
College or University			
Trade, Business or Correspondence School			

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor/title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	
Immediate supervisor/title		Summarize the nature of work performed and job responsibilities	
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Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

DRIVING INFORMATION

Complete only if driving is an essential function of the job for which you are applying.

Do you have a current valid driver's license? ___Yes ___No

If yes, License # _____ State _____ Expiration Date _____

If you do not have a driver's license for the state in which you currently reside, why not?

Has your license ever been revoked? ___Yes ___No

If yes, explain: _____

Do you have personal automobile insurance? ___Yes ___No

If no, explain: _____

Have you ever been denied personal automobile insurance or has it ever been terminated or suspended? ___Yes ___No If yes, explain: _____



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Please list all moving traffic violations in the last five (5) years:

Offense	Date	Location	Comments

REFERENCES

Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for the North Country Library System to hire me. If I am hired, I understand that either NCLS or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of NCLS has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to the North Country Library System true and complete information on this application. No requested information has been concealed. I authorize NCLS to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.