



Employment Application

1000 Grand Avenue • Des Moines, Iowa • 50309
515.283.4152 • Fax:515.237.1654 • www.desmoineslibrary.com

Last Name _____ First Name _____ Middle Initial _____
Address _____ City _____ State _____ Zip Code _____
Phone Number _____ Alternate Phone Number _____
Social Security Number _____ -- _____ -- _____ E-mail _____

If you are under 18 years of age, provide date of birth: _____
Month Day Year

Position Applied For: _____
Other Positions of Interest: _____
Are you interested in _____ full-time or _____ part-time?

EDUCATION

Circle highest year of education completed. 8 9 10 11 12/ GED 1 2 3 4 5 5+
High School Post High School

Post High School Education

Name	From		To		Number of Credits		Major	Diploma/ Degree	
	Mo.	Yr.	Mo.	Yr.	Sem.	Qtr.		Mo.	Yr.

If you have other education you would like the library to consider, submit additional pages or resume.

IMPORTANT INFORMATION

1. Do you object to inquiry of your present employer? Yes _____ No _____
2. Have you ever been employed by the Des Moines Public Library? Yes _____ No _____
3. Have you ever been discharged or asked to resign from employment? Yes _____ No _____
4. Have you ever been convicted of a crime other than a minor traffic violation? Yes _____ No _____

If you have answered "yes" to any of the above questions. please give particulars in comment box below. A yes answer does not automatically disqualify you from employment.

Comments:

DRIVING INFORMATION

Do you possess a valid driver's license? Yes _____ No _____ Driver's license number _____
Issuing State _____

The Des Moines Public Library is an Equal Employment Opportunity Employer. Qualified applicants are eligible to compete for positions without regard to race, color, national origin, sex, creed, religion, age, physical or mental disability, or marital status. Persons of color, women and veterans are encouraged to apply.

FOR OFFICE USE ONLY- DO NOT WRITE IN THIS AREA

Reviewed By _____ Meets or exceeds minimum qualifications for position. Yes _____ No _____

Test Results : _____ Comments: _____

EMPLOYMENT RECORD

List below, from most recent to least recent, positions you have held during the past ten (10) years. If more than one position has been held in one company list each of them. If you have more than three positions, use additional sheets as needed following format below. Resumes may be submitted as a supplement.

1. Present/last employer _____ Date Hired _____ Date Separated _____
Address _____ City _____ State _____ Zip _____
Immediate Supervisor _____ Phone # of Supervisor _____ # of hrs/wk _____
Position _____ Duties _____

Reason for Leaving _____

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Position _____ Duties _____

Reason for Leaving _____

PLEASE LIST ANY ADDITIONAL INFORMATION YOU WISH TO BE CONSIDERED WITH THIS
APPLICATION ON A SEPARATE PIECE OF PAPER.

READ THIS STATEMENT BEFORE SIGNING.

I hereby certify that this application is complete to the best of my knowledge for the periods of employment listed. All information given is true and contains no misrepresentations.

FURTHERMORE:

1. I am aware that all statements submitted on this application are subject to investigation and verification.
2. I authorize the persons, schools, law enforcement agencies and other organizations or employers named in this application to provide information requested by the Des Moines Public Library in its processing of this application.
3. I agree to provide, upon request of the library, written releases and waivers of confidentiality should any former employer or school require such a release.
4. I understand that any withholding of information or misrepresentation on this application or on city medical forms could result in rejection for employment, or if employed, termination from the library.
5. I understand any offer of full-time employment is conditional upon successfully completing a physical which includes a drug screen.

Signature _____

Date _____