



# Niles Public Library District

6960 Oakton Street • Niles, Illinois 60714  
847-663-1234 • [www.nileslibrary.org](http://www.nileslibrary.org)

## **Application for Employment**

**The Niles Library began as a volunteer library and, in April 1959, a referendum passed establishing the Niles Public Library District.**

**Today the Niles Public Library is a very busy library serving over 58,000 residents in Niles and parts of unincorporated Des Plaines and Glenview and circulating more than 1.2 million items each year.**

**The mission of the Niles Public Library District is to enrich the community by meeting its informational, educational, cultural and recreational needs by providing a wide variety of materials, resources, and services as well as a friendly, experienced and professional staff in a safe and welcoming environment.**

The Niles Public Library District is an Equal Opportunity Employer, and does not discriminate in any of its employment practices on the basis of race, color, religion, gender, national origin, ancestry, age, marital status, physical or mental disability, military status, sexual orientation, or citizenship status.

**THOSE APPLICANTS REQUIRING REASONABLE ACCOMMODATION TO THE APPLICATION/INTERVIEW PROCESS SHOULD NOTIFY THE HUMAN RESOURCES COORDINATOR.**

**NILES PUBLIC LIBRARY DISTRICT  
APPLICATION FOR EMPLOYMENT  
(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)**

**PERSONAL INFORMATION (PLEASE PRINT)**

DATE \_\_\_\_\_

NAME \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

PHONE NUMBER \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

DO YOU HAVE A VALID ILLINOIS DRIVER'S LICENSE?  Yes

ARE YOU 18 YEARS OR OLDER?  Yes  No IF YOU ARE UNDER 16, ARE YOU ABLE TO PROVIDE A WORKPERMIT?  Yes  No

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THIS COUNTRY?  Yes  No  
 VALID DOCUMENTATION OF ELIGIBILITY TO WORK IN THE UNITED STATES IS REQUIRED UPON EMPLOYMENT.

**EMPLOYMENT DESIRED**

POSITION (s) \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

ARE YOU AVAILABLE TO WORK: \_\_\_\_\_ FULL-TIME \_\_\_\_\_ PART-TIME

HOURS YOU ARE AVAILABLE TO WORK (enter the times during the day that you are available to work below):

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From							
To							

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING, WITHOUT ACCOMMODATION?  
 Yes  No If no, please explain the accommodation you need: \_\_\_\_\_

HAVE YOU EVER APPLIED TO THE LIBRARY DISTRICT BEFORE? \_\_\_\_\_ WHERE? \_\_\_\_\_ WHEN? \_\_\_\_\_

DO YOU HAVE ANY RELATIVES OR FRIENDS CURRENTLY WORKING FOR THE LIBRARY DISTRICT?  Yes  No

IF YES, PLEASE INDICATE NAME(S) AND RELATION \_\_\_\_\_

LEARNED ABOUT THE POSITION OR REFERRED BY \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? \_\_\_\_\_

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	MAJOR AREAS OF STUDY
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS, CORRESPONDENCE, OR MILITARY SCHOOL				

DO YOU READ, WRITE AND SPEAK ENGLISH? \_\_\_\_\_ YES \_\_\_\_\_ SOMEWHAT \_\_\_\_\_ NO

DO YOU SPEAK A LANGUAGE OTHER THAN ENGLISH? If Yes, please indicate which language and if you speak fluently, good, or fair.  
 \_\_\_\_\_

**GENERAL**

SPECIAL SKILLS \_\_\_\_\_  
 \_\_\_\_\_

ACTIVITIES (CIVIC, ATHLETIC, ETC.) \_\_\_\_\_  
 (EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS)

U. S. MILITARY OR NAVAL SERVICE \_\_\_\_\_ RANK \_\_\_\_\_ PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES \_\_\_\_\_

**FORMER EMPLOYERS** (LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST)

1.	Employer:		Dates Employed:	
	Address:		From:	To:
	Phone Number:		Hourly Rate/Salary	
	Job Title:	Supervisor: (May we contact? _____ )	Starting:	Final:
	Work Performed:			
	Reason For Leaving:			
2.	Employer:		Dates Employed:	
	Address:		From:	To:
	Phone Number:		Hourly Rate/Salary	
	Job Title:	Supervisor: (May we contact? _____ )	Starting:	Final:
	Work Performed:			
	Reason For Leaving:			
3.	Employer:		Dates Employed:	
	Address:		From:	To:
	Phone Number:		Hourly Rate/Salary	
	Job Title:	Supervisor: (May we contact? _____ )	Starting:	Final:
	Work Performed:			
	Reason For Leaving:			

WHICH OF THESE JOBS DID YOU LIKE BEST AND WHY? \_\_\_\_\_  
 \_\_\_\_\_

PLEASE PROVIDE ANY ADDITIONAL INFORMATION WHICH YOU FEEL WOULD BE HELPFUL IN CONSIDERING YOUR APPLICATION:

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**PROFESSIONAL REFERENCES (if not available, please provide personal references)**

NAME	ADDRESS	PHONE NO.	BUSINESS	YEARS ACQUAINTED
1.				
2.				
3.				

IN CASE OF EMERGENCY NOTIFY \_\_\_\_\_  
NAME ADDRESS PHONE NUMBER

**APPLICANT'S CERTIFICATION AND AGREEMENT**

I certify that all the information submitted by me on this application is true and complete, and I authorize investigation of all statements contained in this application of employment. I understand that if any false information, omissions or misrepresentations are contained in my application or given during an interview will cause my application to be rejected or, if I am employed, my employment may be terminated.

I understand that, if offered employment that I agree to conform to the Niles Public Library District's rules and regulations and I agree that my employment and compensation is "at-will".

I understand that if I am hired I will be required to provide proof of identity and information for compliance with the immigration reform and control act.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_

REMARKS \_\_\_\_\_

HIRED: YES \_\_\_\_\_ NO \_\_\_\_\_ POSITION \_\_\_\_\_ DEPT. \_\_\_\_\_

SALARY / WAGE \_\_\_\_\_ DATE REPORTING TO WORK \_\_\_\_\_

APPROVED:

PRINTED NAME \_\_\_\_\_ TITLE \_\_\_\_\_ SIGNATURE \_\_\_\_\_