



New Castle-Henry County Public Library
376 S. 15th Street, New Castle, IN 47362
765-529-0362

Employment Application

New Castle-Henry County Public Library does not discriminate in employment on the basis of race, color, religion, national origin, age, sexual orientation, gender identity or disability. No question on this application is intended to secure information which would be used to discriminate.

Name:	Date:	
Current Address:		
City:	State:	Zip:
Telephone # (s):		E-mail Address:
Position desired:		Date Available for work:
Willing to work: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Saturdays <input type="checkbox"/> Sundays <input type="checkbox"/> Days <input type="checkbox"/> Evenings		
Are you authorized to work in the United States?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you related to a current NCHCPL employee?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, who?	Relationship:	

Have you ever pleaded guilty to, or been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No
If so, state the nature of the crime (Applicants are not automatically excluded because of previous criminal history; consideration will be given to the relevance of the crime to the job description for which applicant is applying):
Are you able, with or without Accommodation, to perform the functions of the position for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No
If an Accommodation is necessary, please describe how you would perform the duties of the position:

EDUCATION		
TYPE OF SCHOOL	NAME/CITY AND STATE	COURSE OF STUDY/DEGREE
High School		
University/College		
University/College		
Trade School/Other		

EMPLOYMENT HISTORY			
Present and previous employment including military service (list in order of most recent or current employment first)			
May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Company	Address	City, State, Zip	Phone
Title of position held:		Supervisor:	
Duties Performed:			
From:	To:	Salary:	
Reason for Leaving:			

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Title of position held:		Supervisor:	
Duties Performed:			
From:	To:	Salary:	
Reason for Leaving:			

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Title of position held:		Supervisor:	
Duties Performed:			
From:	To:	Salary:	
Reason for Leaving:			

PROFESSIONAL REFERENCES		
NAME	ADDRESS	TELEPHONE/E-MAIL

Statement by the Applicant

I fully understand that any offer of employment shall be subject to pre-employment reference checks and drug screens. I understand and agree that if hired by NCHC Public Library, my employment with this facility is for no specific period of time and may be terminated by either party "at will." All of the information on this application is a full and complete statement of facts and I realize that any false or incomplete information may be grounds for dismissal. I authorize inquiries as to my character, personal reputation and ability, and I understand you may make use of the Internet, including social networking sites prior to employment and at any time during my employment period. I release those supplying any information and prospective employer from all liability. Upon my termination from this facility whether by dismissal or resignation, I authorize the release of reference information regarding my employment at this facility.

Signature of Applicant

Date