



East Bonner County Free Library District

Employment Application

Position applying for: _____

Personal Information		
Name (Last, First, Middle)	Telephone Number	
Address	Message Number	
City/State/Zip	E-mail Address	
Are you legally authorized to work in the United States? Yes ___ No ___	Are you eighteen years of age or older? Yes ___ No ___	
Are you related by blood or marriage to anyone now employed by East Bonner County Library District? Yes ___ No ___ If yes, provide name and relationship: _____		
Are you applying for: Full Time ___ Part-Time ___ Temp ___	What shift(s) will you work? Days ___ Evening ___ Saturday ___	
Employment History		
Dates From: _____ To: _____	Company Name	City, State
Titles and Duties:		
Reason for Leaving:	Supervisor's Name	Telephone Number
Dates From: _____ To: _____	Company Name	City, State
Titles and Duties:		
Reason for Leaving:	Supervisor's Name	Telephone Number
Dates From: _____ To: _____	Company Name	City, State
Titles and Duties:		
Reason for Leaving:	Supervisor's Name	Telephone Number
Military		
Are you a veteran or family member who qualifies for and are claiming preference pursuant to Idaho Code 65-503 or its successor? Yes ___ No ___ (If yes, fill out the attached Veteran's Preference Form & attach proper documentation)		
Have you previously claimed such preference Yes ___ No ___		

Military - *continued*

Describe any military training relevant to the position for which you are applying:

Education/Training

School	Name & Location	Diploma/Degree	Subject of Specialization
High School			
College University Technical School			
Specialized Courses & Training			

Skills

Clerical Skills

Keyboarding/Typing WPM _____	List specific computer skills:
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Other Special Skills

List other specific skills you have to offer for this position:

References

Unless previously provided on this application, please list the names of three former supervisors we may contact

Supervisor's Name	Past Employer Name/City/State	Telephone	Occupation/Field

The information on this application is true and accurate to the best of my knowledge. Any false statements made intentionally will be cause for immediate reprimand and/or dismissal.

Signature _____ Date _____

The East Bonner County Library District is an Equal Opportunity Employer



VETERAN'S PREFERENCE

Per Idaho Code, Title 65, Chapter 5, Employer will afford a preference to employment of veterans. In the event of equal qualifications and experience between candidates for an available position, a veteran who qualifies will be preferred. If claiming veteran's preference, please complete the information below and attach a copy of your DD-214 to this application.

(Reference Idaho Code, Title 65, Chapter 5, and 5 U.S.C. § 2108)

The term "**active duty**" means full-time duty in the Armed Forces, but NOT active duty for training.

Part 1. Preference Eligible Veterans:

- I have a service-connected disability of 10% or more.
- I am the spouse of an eligible disabled veteran, who has a service-connected disability.
- I am the widow or widower of an eligible veteran and have remained unmarried.
- I do not meet any of the selections above, but I served on active duty in the armed forces of the United States for a period of more than one-hundred eighty (180) days and was honorably discharged.

Part 2. Documentation & Signature:

By my signature, I certify that all statements on this form are true and complete to the best of my knowledge. I understand that should an investigation disclose inaccurate or misleading answers, my application may be rejected and my name removed from consideration for employment with Employer.

- I have attached a copy of my DD-214. Veteran's preference will not be considered without this document.

Name (Please Print)

Signature

DATE: _____