

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 you would like to include, use additional sheets as needed following the format below. Resumes may be submitted as a supplement.

1. Present / most recent employer _____ Date Hired _____ Date Separated _____
Address _____ City _____ State _____ Zip Code _____
Immediate Supervisor _____ Phone # of Supervisor _____ # of hrs / wk _____
Position _____ Duties _____
Reason for Leaving _____

2. Present / most recent employer _____ Date Hired _____ Date Separated _____
Address _____ City _____ State _____ Zip Code _____
Immediate Supervisor _____ Phone # of Supervisor _____ # of hrs / wk _____
Position _____ Duties _____
Reason for Leaving _____

3. Present / most recent employer _____ Date Hired _____ Date Separated _____
Address _____ City _____ State _____ Zip Code _____
Immediate Supervisor _____ Phone # of Supervisor _____ # of hrs / wk _____
Position _____ Duties _____
Reason for Leaving _____

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 _____