

Thank you for considering the Southern Prairie Library System for employment.

Please return the letter of introduction, resume and application to:

The Altus Public Library, 421 N. Hudson, Altus, Oklahoma

in a **sealed envelope marked “Attention: Executive Director”**

Or, you may mail the application to:

Executive Director
Southern Prairie Library System
P.O. Box 1141
Altus, OK 73522



EMPLOYMENT APPLICATION

SOUTHERN PRAIRIE LIBRARY SYSTEM

421 N. Hudson
Altus, OK 73521
www.spls.lib.ok.us

SPLS is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.

(PLEASE PRINT IN INK)

Position(s) Applied For		Date of Application	
Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Telephone Number		Alternate Number	
E-mail address			
How Did You Hear About Us?			
<input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Employment Agency <input type="checkbox"/> Website			
<input type="checkbox"/> SPLS Employee _____ <input type="checkbox"/> Other _____			

Are you legally eligible to work in the United States? YES NO

(Proof of eligibility will be required upon offer of employment)

Are you over the age of 18 years? YES NO

(If no, you may be required to provide authorization)

Have you ever filed an application with us before? YES NO

If yes, what date? _____

Are you currently employed? YES NO

If so, may we contact your employer? YES NO

Have you ever been convicted of a felony? YES NO

If yes, please explain: _____

Do you have a valid driver's license? YES NO

Can you travel if a work assignment requires it? YES NO

Is anyone related to you employed by SPLS? YES NO

If yes, please give their name and relationship to you. _____

Have you ever been fired or asked to resign from a job? YES NO

If yes, please explain. _____

Are you physically or otherwise unable to perform the duties of the job for which you are applying? YES NO

If yes, please explain. _____

AVAILABILITY

On what date would you be available to work? _____

Are you available to work: Full time Part time Temporary Evenings Weekends

EDUCATION

	Name and Location of School	Course of Study or Major	# of Years Completed	Diploma/ Degree
High School				
College				
Graduate				
Vocational				

Please list any academic honors, scholarships, offices held, etc.

Describe any specialized training, apprenticeships, licenses or skills.

Have you received any job-related training in the United States Military? YES NO

Please give dates and explanation:

Please provide any other information that you feel will help us in considering your application for employment.

EMPLOYMENT HISTORY

(Begin with current or most recent employer. Do not exclude any employment. Include any applicable temporary employment. Attach another sheet if necessary. Previous salaries or wages will not be used to determine compensation at SPLS.)

Company Name	Employment Dates From ____/____/____ To ____/____/____	Salary Start \$_____ End \$_____	Name and Title of Supervisor
Address	Job title and description of duties:		
Phone			

Reason for leaving:

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Phone			

Reason for leaving:

REFERENCES

Please list three people, who are not previous supervisors and are not related to you, who can provide professional references.

Name	Phone Number	Relationship/Occupation	Years Known

APPLICANT'S STATEMENT AND AUTHORIZATION:

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that before employment can be offered to me, I will have to consent to a background check and drug screening as a condition of employment.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing and signed by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in the application or interview may result in discharge. I also understand that I am required to follow all rules and regulations of the employer.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature

Date

SPLS IS AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.

This application for employment shall be considered active for a period of one year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.