

Is there any information we need about your name or use of another name to be able to check your work record? _____

In addition to the supervisors listed above, please provide the names of three (3) work-related references:

Name	Occupation	Address	Phone	Yrs. Known

Applicant's Statement

I understand that the Fremont County Library System ["the employer"] follows an "employment at will" policy, in that the employer or I may terminate my employment at any time, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract for employment.

I understand that this application will be active for a period of three (3) months; after that time, if I wish to be considered for employment, I must submit a new application.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application, or related papers, and interviews. I authorize all individuals, schools, and firms named herein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information. This information will be kept in strict confidence and will be available only to library personnel who are involved in the hiring decision.

I certify that all the statements herein are true and understand that any falsifications or willful omissions shall be sufficient cause for dismissal or refusal of employment.

Signature: _____ Date: _____

The Fremont County Library System employs people on the basis of their qualifications and with assurance of equal opportunity and treatment regardless of race, religion, color, sex, age, national origin, ancestry or disability.
