SHELVER APPLICATION ONLY

INSTRUCTIONS: This application is part of the examination process. It must be completely filled out and signed to be accepted for review. Late and/or incomplete applications will be rejected.

PLEASE PRINT OR TYPE JOB/EXAMINATION TITLE:							
NAME:LAST		FIRST			MIDDLE INITIAL		
			,	OTATE			
ADDRESS:			_CTTY:	;	STATE		ZIP CODE:
PRIMARY PHONE:		SECONDARY PH	HONE:	E-MA	IL:		
DRIVER'S LICENSE: <u>Compl</u>	ete this section if	required for th	he position you a	re applying fo	<u>r:</u>	Yes	No
State:	Number:		Class: Exp		oiration Date:		
Have you ever been discharge Please explain fully in the space	•	ign from any posi	tion for misconduct of	or unsatisfactory s	service?	Yes	□ No
AUTHORITY EMPLOYMENT: Are you related to anyone employed by the Sacramento Public Library ? Yes					☐ No		
 Did you graduate from High High School Attended: 	School or receive a (GED? Y	′es	No			
(Only education a	nd training which rela	_	CATION AND TRAIL		ich vou are	annlying r	need to be listed)
		Major Subject		Dates Attended From To		mpleted r/Quarter	List Degree Earned and Graduation Date
Specialized training whice Type of Training: Institution:							
Certification, Accreditation	n or License, Da	te:					

EXPERIENCE

Begin with your most recent position. List all jobs separately. You may attach a resume but be sure to include all information requested below. Use additional sheets if needed.

	I have no prior work experience				
Employed	Your Title: Hours/Week:	Employer:			
From:	Your Duties:	Address:			
Yr.					
To:					
Mo. Yr.		Reason for Leaving:			
Salary:	This job was: Paid Volunteer No. of People Supervised:				
Employed	Your Title:Hours/Week:	Employer:			
From:					
/ Mo.	Your Duties:	Address:			
Yr.					
To:					
Mo. Yr.		Reason for Leaving:			
Salary:	This job was: Paid Volunteer No. of People Supervised:				
Employed	Your Title: Hours/Week:	Employer:			
From:					
Mo. Yr.	Your Duties:	Address:			
То:					
Mo. Yr.					
Salary:	This job was: ☐ Paid ☐ Volunteer ☐ No. of People Supervised:	Reason for Leaving:			
Employed					
From:	Your Title:Hours/Week:	Employer:			
/ Mo. Yr.	Your Duties:	Address:			
То:					
Mo. Yr.					
	This job was: ☐ Paid ☐ Volunteer ☐ No. of People Supervised:	Reason for Leaving:			
Salary: \$	This job was: Paid Volunteer No. of People Supervised:				
May we contact yo	our current or most recent employer?	☐ No			
DIABLED APPLICANTS: The Sacramento Public Library will make reasonable accommodations in the exam process to accommodate disable applicants. If you are invited to participate in any test process and have a disability for which you require an accommodation, please contact the Sacramento Public Library Human Resources Department 916-264-2758.					
I hereby certify that all statements made in this application are true and I agree and understand that any misstatement or omission of material fact will cause forfeiture on my part of all rights of employment with the Sacramento Public Library. I authorize investigation of all matters contained in this application. If offered a position, I further agree to be fingerprinted, to sign an oath or office, and to furnish proof of age, education, either citizenship or the legal right to work in the United States of America. Additionally, submit to a urine drug screen test and review of my DMV driving record (if job related) upon my appointment.					
SIGNATURE: DATE:					

SACRAMENTO PUBLIC LIBRARY AUTHORITY DATE Job/Examination Title **EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE** Applicant: This completed section is confidential and will be detached from your application. This information is voluntary and is gathered in accordance with State and Federal laws for the purpose of evaluating the effectiveness of our equal opportunity policy and recruitment efforts. This information will not be used for employment discussions. ☐ Female CHECK ONE: Male PLEASE CHECK ONE BOX ONLY FOR THE RACIAL/ETHNIC CATEGORY WITH WHICH YOU MOST CLOSELY IDENTIFY WITH (SEE BELOW FOR THE ETHNIC and RACIAL DEFINITIONS.) ☐ HISPANIC OR LATINO: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race. ☐ WHITE (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. ☐ BLACK OR AFRICAN AMERICAN (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa. ☐ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands. A person having origins in any of the original peoples of the Far East, ☐ ASIAN (Not Hispanic or Latino): Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. MERICAN INDIAN (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal OR ALASKAN NATIVE Affiliation or community attachment. ☐ TWO OR MORE RACES (Not Hispanic or Latino): All persons who identify with more than one of the above five races.

VETERANS STATUS □ YES □ No