**Application for Employment**

Applications are considered without regard to race, color, religion, sex, sexual orientation, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

**PERSONAL INFORMATION:**

# Date       Available to Start Date

Name:       Email Address:

Street Address:       Phone:

City/State/Zip:

Work Requested: [ ]  Full Time [ ]  Part Time.

Have you worked for the Library previously? [ ]  Yes [ ]  No If Yes, when?

Have you ever been convicted of a felony or misdemeanor? [ ]  Yes [ ]  No
If yes, please explain details in full, including dates, details of offense(s) charged, jurisdiction and disposition of case:

**EDUCATION:**

# Include High Schools, Vocational Schools, Colleges & Universities: # Years Degree

**EMPLOYMENT/WORK EXPERIENCE:** Start with your present or most recent position. Include military service assignments and volunteer activities.

## Employer:

### Job Title:       Supervisor:

# Street Address:

# City/State/Zip:       Phone:

# Describe Duties/Responsibilities/Accomplishments:

### Reason for Leaving:

Dates of Employment (Month/Year): From       To

## Employer:

### Job Title:       Supervisor:

# Street Address:

# City/State/Zip:       Phone:

# Describe Duties/Responsibilities/Accomplishments:

### Reason for Leaving:

Dates of Employment (Month/Year): From       To

## Employer:

### Job Title:       Supervisor:

# Street Address:

# City/State/Zip:       Phone:

# Describe Duties/Responsibilities/Accomplishments:

### Reason for Leaving:

Dates of Employment (Month/Year): From       To

# **REFERENCES:** Please provide references from three people not related to you. Provide individual and company names, position or relationship, addresses and phone numbers as applicable.

Name:

Company:

Street Address:

Position/Relationship:

City/State/Zip:       Phone:

Name:

Company:

Street Address:

Position/Relationship:

City/State/Zip:       Phone:

Name:

Company:

Street Address:

Position/Relationship:

City/State/Zip:       Phone:

**SPECIAL SKILLS OR OTHER INFORMATION:** Describe any special skills or qualifications for this work, or anything else you would like us to know that was not previously mentioned:

I CERTIFY that the above answers are true and complete to the best of my knowledge. I authorize Morgan County Public Library to investigate any statement contained in this application as necessary to determine my qualifications. I understand that this application is not and is not intended to be any kind of contract or agreement. In the event of employment, I understand that any false or misleading information given in my application, correspondence, discussions or interview may result in immediate termination. I understand also, that I am required to abide by all rules, regulations and policies of the Morgan County Public Library.

Under the penalty of perjury, I attest that I am a citizen or national of the United States, an alien lawfully admitted for permanent residence, or an alien who is authorized by federal law or by the U. S. Attorney General to be hired, recruited, or referred for such employment.

# Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

**FOR LIBRARY USE ONLY:**

Arrange Interview: [ ]  Yes [ ]  No Date:

Remarks:

Approved: [ ]  Yes [ ]  No Date:

By: