

# APPLICATION FOR EMPLOYMENT (Library Only)

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

## PERSONAL INFORMATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

PHONE: \_\_\_\_\_ ARE YOU SIXTEEN YEARS OR OLDER?  YES  NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS?  Yes  No

IN CASE OF EMERGENCY: \_\_\_\_\_ PHONE: \_\_\_\_\_  
NAME ADDRESS CITY/STATE/ZIP

## EMPLOYMENT DESIRED

POSITION:  Library Director  Assistant Library Director  Library Clerk

AVAILABLE: Date you can start: \_\_\_\_\_

Are you employed now?  Yes  No IF yes, may we inquire of your present employer?  Yes  No

If yes/ please give name and number \_\_\_\_\_

## EDUCATION

Name & location of last school attended: \_\_\_\_\_

Are you still a student?  Yes  No If yes, what grade: \_\_\_\_\_

If no, did you graduate?  Yes  No IF no, please explain: \_\_\_\_\_

Please rate your computer skill level:  Beginner  Intermediate  Advanced

Studies or Skills which you believe will help you in the library position you desire? \_\_\_\_\_

## EMPLOYMENT HISTORY

PLEASE LIST YOUR EMPLOYMENT HISTORY BEGINNING WITH THE MOST RECENT GOING BACK NO MORE THAN THREE (3)

DATE: MONTH/ YEAR FROM	NAME ADDRESS OF EMPLOYER	POSITION	REASON FOR LEAVING
TO			
FROM			
TO			
FROM			
TO			

Middle Name:

First Name:

Last Name

**REFERENCES**

PLEASE LIST THE NAME OF THREE PERSONS NOT RELATED TO YOU WHO HAVE KNOWN YOU FOR AT LEAST ONE YEAR

NAME	PHONE NUMBER	HOW YOU KNOW THEM: i.e., friend, teacher, boss, neighbor, etc.	HOW MANY YEARS
1.			
2.			
3.			

**COMMENTS**

IF THERE IS ANYTHING YOU WISH TO TELL US WHICH HAS NOT BEEN ADDRESSED IN THE PRE-EMPLOYMENT QUESTIONNAIRE, PLEASE DO SO HERE

---



---



---



---



---

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE LIBRARY'S RULES AND REGULATIONS AS AUTHORIZED BY THE CITY OF MILFORD. I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME AT EITHER MY OR THE LIBRARY'S/CITY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE LIBRARY/CITY. I UNDERSTAND THAT THE LIBRARY DIRECTOR AND THE LIBRARY BOARD ACT IN AN ADVISORY CAPACITY RECOMMENDING PERSONS TO BE HIRED FOR LIBRARY POSITIONS AS NEEDED. I FULLY UNDERSTAND THAT THE MILFORD CITY COUNCIL IS THE HIRING BODY FOR THE LIBRARY AND MAY REJECT RECOMMENDATION FOR HIRING IF IT DEEMS IT NECESSARY AND THAT SAID BODY SETS THE SALARY FOR ALL POSITIONS.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

INTERVIEW DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NEATNESS: \_\_\_\_\_ ABILITIES: \_\_\_\_\_

RECOMMENDATION: HIRE  Yes  No

Position:  Library Director  Assistant Library Director  Library Clerk Salary recommendation: \_\_\_\_\_

Recommended Starting Date: \_\_\_\_\_

Signatures of interviewers: \_\_\_\_\_  
 \_\_\_\_\_