

GENERAL APPLICATION FOR EMPLOYMENT

Last Name	First Name	MI
Other names presently or formerly used		
E-mail Address		
Street Address		Phone
City	State	Zip Code
Names of employees of this organization w	vith whom you are acquainted	
Names of any relatives you have in this org	ganization's employ	
Have you ever applied here before?	Are you at least 18	years of age?

EDUCATION

Type of School	Name & Address of School	Degree	Area of Study	No. of Years Attended	Did you Graduate?	Class Rank & GPA
High School						
College						
Other						

Any special awards?_____

Professional Certifications

JOB INTERESTS

Type of work/position desired	
How did you hear about the position?	
Salary requested	_Date available for employment
Any hours Not Available to work (List days and times)	

BUSINESS EXPERIENCE

List 3 previous employments beginning with the most recent.

Employer	Type of Business	Telephone	
Address		Starting Salary	Ending Salary
Dates Employed	-	Positions Held	·
From Mo. Yr	To Mo. Yr.		
	MO. 11.		
Duties/Responsibilities		Reason for leaving	
Supervisor's Name and Phone number/I	Email	May we contact?	

Employer	Type of Business	Telephone	
Address		Starting Salary	Ending Salary
Dates Employed		Positions Held	
From	То		
Mo. Yr	Mo. Yr.		
Duties/Responsibilities		Reason for leaving	
Supervisor's Name and Phone number/I	Email	May we contact?	

Employer	Type of Business	Telephone	
Address		Starting Salary	Ending Salary
Dates Employed	T	Positions Held	·
From Mo. Yr	To Mo. Yr.		
Duties/Responsibilities		Reason for leaving	
Supervisor's Name and Phone number/I	Email	May we contact?	

OTHER QUALIFICATIONS

List any special skills you have______ List software applications in which you are proficient______

SPECIAL ACTIVITIES

Please exclude organizations, clubs or societies that reveal the race, color, religion, sex, national origin, disability or age of its members.

Professional Organizations, Clubs, Societies, Other	Did you actively participate?	Do you currently participate?	Offices held during last 5 years	Average time given per wk

U.S. MILITARY SERVICE RECORD

Have you served in our armed services? _____Branch of Service_____

Special training or honors received_____

ADDITIONAL INFORMATION

This employment application does not seek information regarding the applicant's criminal record. However, the Library reserves the right to make inquiry into the applicant's criminal record, to conduct a criminal background check and to condition any offer of employment on the information obtained from any such inquiry or background check. In evaluating an applicant's criminal record, the Library shall make an individualized assessment, utilizing the factors permitted by applicable law.

Are you restricted or prohibited from being legally employed in the U.S.? (Proof of identity and employment eligibility will be required) Yes____No____

REFERENCES

Business References. (Names, relationship and addresses of 3 people in companies where you have been employed or with whom You have had frequent business dealings)

1. Name	_Phone
Relationship	_E-mail
Address	
2. Name	_Phone
Relationship	E-mail
Address	
3. Name	_Phone
Relationship	E-mail
Address	

Personal References. (Names and addresses of 2 people other than relatives or former employers who have known you at least 5 years, such as teachers, neighbors, public officials, etc.)

1. Name	Phone
Address	E-mail
2. Name	Phone
Address	E-mail

EQUAL OPPORTUNITY EMPLOYMENT

It is the policy of the Washington-Centerville Public Library to be in compliance with all federal, state, and local laws and regulations relative to discrimination in employment. The Washington Centerville Public Library does not discriminate in compensation or conditions of employment, including recruitment, hiring, promotion, training, transfer, discipline, or discharge of any applicant or employee on the basis of race, color, ancestry, religion, national origin, citizenship, gender, pregnancy, gender identity, sexual orientation, age, veteran or military status, disability, genetic information, or any other characteristic protected by federal, state, or local law. Reasonable accommodation will be made to enable otherwise qualified individuals with disabilities to perform the essential functions of the job.

PLEASE READ CAREFULLY BEFORE SIGNING

I understand that nothing contained in this application or in the granting of an interview is intended to create an employment contract between Washington-Centerville Public Library (WCPL) and myself for either employment or for the provision of any benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon WCPL, and further understand and agree that my employment and compensation is for no definite period and may be terminated, with or without cause, and with or without notice, at any time, at the option of either WCPL or myself. I hereby certify that the answers given and statements made are complete, true and correct. If any statement is found not to be true this will be grounds for immediate dismissal. I hereby authorize all my previous employers or references to furnish any information concerning my personal character, habits or employment records. I hereby release all such persons as well as the employer itself from liability or damages incurred as a result of inquiry and furnishing this information. I have read, understand and agree to all of the rights being secured by the employer as a condition of employment. I agree that any claim or lawsuit relating to my service with the Washington-Centerville Public Library must be filed no more than six months after the date of employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

Applicant Signature

Date

SUBMISSION OF APPLICATION

Please submit application by mail, in person or email to:

HUMAN RESOURCES WASHINGTON-CENTERVILLE PUBLIC LIBRARY 111 W. Spring Valley Rd. Centerville, OH 45458 or Email: HumanResources@wcpl.lib.oh.us