



10050 RAVENNA ROAD
TWINSBURG, OHIO 44087

APPLICATION FOR EMPLOYMENT

The Twinsburg Public Library is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, sexual orientation or any condition prescribed by state law.

PLEASE TYPE OR PRINT. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered.

PERSONAL

Name (Last, First, Middle)		Home Telephone ()
Other name(s) under which you have attended school or been employed		Cell Telephone ()
Street Address		Business Telephone ()
City, State Zip		Email Address
Position Desired (you must select desired position(s)) <input type="checkbox"/> Circulation Clerk <input type="checkbox"/> Library Assistant/Associate <input type="checkbox"/> Technology <input type="checkbox"/> Clerical/Secretarial <input type="checkbox"/> Page/Shelver <input type="checkbox"/> Other, must specify <input type="checkbox"/> Librarian <input type="checkbox"/> Public Relations _____		Pay Expected Have you ever been employed by the Twinsburg Public Library? <input type="checkbox"/> Yes <input type="checkbox"/> No
Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? Can you work evenings and weekends? <input type="checkbox"/> Yes <input type="checkbox"/> No		Part-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? Can you work evenings and weekends? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		When will you be available to begin work?
Are you at least 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		If NO, what is your current age?
Have you ever been bonded? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes', with what employer(s)?		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.

EDUCATION

School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
GED				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business/Trade/Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Other credentials/licenses/professional affiliations, etc., which are **relevant** to the job(s) for which you are applying.

SKILLS

Please list technical skills, clerical skills, trade skills, etc. **relevant** to this position. Include **relevant** computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert).

MILITARY

Did you serve in the U.S. Armed Forces?

Yes No

If "Yes", in what Branch?

EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer. We may contact the employers listed below unless you indicate those you do not want us to contact.

1	Place of Employment	Telephone ()
	Address	Employed (Month/Year) From to
	Supervisor's Name and Phone Number	Other Reference Name, Title and Phone Number
	May we contact this employer? <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate <input type="checkbox"/> No Give reason.	Starting Weekly Salary Final Weekly Salary
	State Job Title and Describe Your Work	Reason for Leaving

2	Place of Employment	Telephone ()
	Address	Employed (Month/Year) From to
	Supervisor's Name and Phone Number	Other Reference Name, Title and Phone Number
	May we contact this employer? <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate <input type="checkbox"/> No Give reason.	Starting Weekly Salary Final Weekly Salary
	State Job Title and Describe Your Work	Reason for Leaving

3	Place of Employment	Telephone ()
	Address	Employed (Month/Year) From to
	Supervisor's Name and Phone Number	Other Reference Name, Title and Phone Number
	May we contact this employer? <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate <input type="checkbox"/> No Give reason.	Starting Weekly Salary Final Weekly Salary
	State Job Title and Describe Your Work	Reason for Leaving

4	Place of Employment	Telephone ()
	Address	Employed (Month/Year) From to
	Supervisor's Name and Phone Number	Other Reference Name, Title and Phone Number
	May we contact this employer? <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate <input type="checkbox"/> No Give reason.	Starting Weekly Salary Final Weekly Salary
	State Job Title and Describe Your Work	Reason for Leaving

5	Place of Employment	Telephone ()
	Address	Employed (Month/Year) From to
	Supervisor's Name and Phone Number	Other Reference Name, Title and Phone Number
	May we contact this employer? <input type="checkbox"/> At any time <input type="checkbox"/> Only if I am a finalist candidate <input type="checkbox"/> No Give reason.	Starting Weekly Salary Final Weekly Salary
	State Job Title and Describe Your Work	Reason for Leaving

SIGNATURE

Please read and understand this statement before signing your application:

The information I provided in this Application for Employment is true. False, incomplete or misrepresented information will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to obtain information about me from previous employers, education institutions and other parties to verify the accuracy of information in this application, a related employment resume or personal interviews. I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons who provide information for this purpose.

This application is not an employment agreement. If I accept an offer of employment I understand I may resign at any time, and the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I understand and agree that all information furnished in this application may be verified by the Twinsburg Public Library. I also understand that any employment is subject to satisfactory check for references and a background check. I hereby authorize all individuals and organizations named or referred to this application and any law enforcement organization to give the Library all information relative to my employment, work habits, and character and hereby release such individuals, organizations, and the Library from any liability for any claim or damage which may result.

I accept all terms and conditions in the above statement.

Signature: _____

Date: _____