

## THE MONROE CITY PUBLIC LIBRARY

## **APPLICATION FOR EMPLOYMENT**

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FULL NAME (LAST NAME, FIRST):	DATE:
STREET ADDRESS:	HOME TELEPHONE:
CITY, STATE, AND ZIP:	CELL:
POSITION DESIRED:	OTHER:
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES?	EMAIL ADDRESS:

Federal law requires that all employers verify the identity and employment eligibility of all new employees (including U.S. citizens). The library uses the E-Verify system established by the Department of Homeland Security (DHS) and the Social Security Administration (SSA).



E D U C A T I O N

SCHOOL	NAME AND LOCATION	COURSE OF STUDY	DID YOU GRADUATE?	DEGREE OR DIPLOMA
HIGH SCHOOL				
BUSINESS, TRADE, OR TECHNICAL				
COLLEGE				
GRADUATE LEVEL				

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		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
FRO	OM:						
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WHEN WILL YOU BE AVAILABLE TO BEGIN WORK?

## WORK HISTORY (LIST YOUR PRESENT OR MOST RECENT EMPLOYER FIRST.)

	COMPANY NAME:	TELEPHONE:
1	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:
	COMPANY NAME:	TELEPHONE:
2	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:
	COMPANY NAME:	TELEPHONE:
3	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:
	COMPANY NAME:	TELEPHONE:
4	ADDRESS:	EMPLOYED (MONTH AND YEAR) FROM: TO:
	NAME OF SUPERVISOR:	RATE OF PAY:
	JOB TITLE AND DESCRIPTION OF WORK:	REASON FOR LEAVING:

SKILLS			
PROFICIENCIES	USE DAILY	USE OCCASIONALLY	HAVE NOT USED
EYBOARDING	1	2	3
MAIL	1	2	3
ATA ENTRY/RECORD KEEPING	1	2	3
NTERNET SEARCH ENGINES	1	2	3
OCIAL MEDIA ACCOUNTS	1	2	3
VEBSITE MANAGEMENT	1	2	3
GOOGLE DRIVE™	1	2	3
		ANIZATIONS	
		ANIZATIONS	
MEMBERSHIP IN PROFESSION REFERENCES (THREE PERSONS NOT	NAL OR CIVIC ORG		LEAST ONE YEAR
	NAL OR CIVIC ORG		
MEMBERSHIP IN PROFESSIOI REFERENCES (THREE PERSONS NOT	NAL OR CIVIC ORG	M YOU HAVE KNOWN AT	
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- HAVE YOU READ AND UNDERSTOOD THE LISTING OF THE ESSENTIAL FUNCTIONS FOR THIS JOB? YES NO
- ARE YOU CAPABLE OF PERFORMING THE ESSENTIAL FUNCTIONS INVOLVED IN THIS JOB, WITH OR WITHOUT REASONABLE ACCOMMODATION? YES NO

I CERTIFY THAT THE ABOVE STATEMENTS ARE CORRECT. I UNDERSTAND THAT ANY FALSE INFORMATION OR OMISSIONS IN THIS APPLICATION, OR ITS SUPPORTING DOCUMENTS, WILL BE SUFFICIENT GROUNDS FOR REFUSAL TO HIRE OR TERMINATION WITHOUT NOTICE. I UNDERSTAND THAT THE MONROE CITY PUBLIC LIBRARY HAS THE RIGHT TO REVIEW MY EDUCATION, PREVIOUS EMPLOYMENT AND OTHER BACKGROUND INFORMATION AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT

DECISION. I HEREBY UNDERSTAND THAT, UNLESS OTHERWISE DEFINED I WITH THIS ORGANIZATION IS OF AN "AT WILL" NATURE, WHICH MEANS EMPLOYER MAY DISCHARGE THE EMPLOYEE AT ANY TIME WITH OR WITH INVESTIGATIVE CONSUMER REPORTING AGENCY TO PERFORM CUSTOMAL DO SO. I RELEASE MY FORMER EMPLOYERS AND THE MONROE CITY PUBLI INFORMATION OBTAINED.	THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE OUT CAUSE. IF THE LIBRARY DECIDES TO ENGAGE AN RY REFERENCE CHECKS, I AUTHORIZE THE LIBRARY TO
APPLICANT'S SIGNATURE	DATE
NOTICE OF NONDISCRIMINATION: MONROE CITY PUBLIC LIBRARY DOES I RELIGION, NATIONAL ORIGIN, ANCESTRY, SEX, AGE, DISABILITY, STATUS ERA OR OTHER PROTECTED STATUS.	·

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