

Application for Employment

Pre-Employment Questionnaire Equal Opportunity Employer

				Date	e / ,	l
Personal Info	rmation			Date	,	<u></u>
Name (Last , First)					Nickname	
Present Address			City		State	Zip Code
Home Phone No.					Cell Phone No.	
Email Address					Referred By:	
Employmen	t Desire	ed				
Position			ou Can Start		Part Time Full Time	Salary Desired
Are You Employed Now?	Yes	No	-		Present Employer?	Yes No
Ever Applied or Worked for the Library Previously	? Yes	No	Details of Previous Employment at Library			
Do you have any relative employed by the Library?	yes Yes	No	Name & Relationship to You			
Education F	listorv					
		cation of School	Years Attended	Did You Graduate?	5	Subjects Studied
High School						
College						
Trade, Business, or Correspondence School						
General Info	ormatio	n				
Subject of Special Study						
Special Training						
Special Skills						
U.S. Armed Services Experience			Rank			
U.S. Armed Services Exp					1	
Notes/Comr		/ to know or consid	er			

References

(Provide the Names of Three Persons <u>Not Related to You</u>, Whom You Have Known at Least One Year. Co-workers are Preferred.)

Name	E-Mail Address	Phone	Relationship	Years Known

Former Employers (List Last Four Employers, Starting With Last One First)

Date Month and Year	Name & Address of Employer	Pay	Position	Reason for Leaving
From				
То				
From				
То				
From				
То				
From				
То				

Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the library from liability for any damage that may result from utilization of such information.

I also understand and agree that nothing in this Application for Employment creates, or should be interpreted to create, an employment contract for any specific length of time between the library and any employee.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a Criminal Background Check will be required prior to my employment. The Troy-Miami County Public Library will provide me with written notice regarding the use of this report and will also obtain a separate written authorization from me to consent to the report. I also understand that a conviction will not automatically result in disqualification from employment."

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document upon hire.

In compliance with the Americans with Disabilities Act, the Library will provide reasonable accommodation to employees who are qualified individuals with a disability as long as it does not cause undue hardship for the library.

The Troy-Miami County Public Library is an at-will employer. This means that, if employed, an employee has the right to terminate his or her employment at any time without cause or notice, and that the library has the right to terminate the employment of any employee at any time with or without cause or notice. Unless authorized by a written agreement, signed by the president of the board, no manager or other representative of the library has the authority to enter into any agreement for employment for any specified period of time.

Date	Signature

Complete this application and return it along with a current resume in person, or by mail to: Human Resources, Troy-Miami County Public Library, 419 W. Main Street, Troy OH 45373.