

EMPLOYMENT APPLICATION

Human Resources Department
208 Lincoln Way East, Massillon OH 44646-8488

MASSILLON PUBLIC LIBRARY

Phone: 330.832.9831
FAX: 330.830.2182

Massillon Public Library is an Equal Opportunity 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 or sexual orientation. Applications are considered only when an open position is advertised.

Please type or print, complete all sections sign and date.

Today's Date ____/____/____

Position for which you are applying: _____

APPLICANT INFORMATION

Name (Last, First, Middle): _____

Street Address _____ City/State/Zip _____

_____/_____/_____

Home Phone

Cell

Email

Are you at least 18 years of age? ____ Yes ____ No

Are you legally eligible for employment in the United States?

Availability: ____ Part Time ____ Full Time (34 hrs per week)

____ Yes ____ No

What date are you available to start work? _____

Have you ever been convicted of or pled guilty to a felony or misdemeanor (other than traffic violations)? ____ Yes ____ No

If yes, please explain & provide year of conviction _____

(A conviction will not necessarily be a bar to employment. Factors such as date, nature and number of offenses, age at the time of the offence and rehabilitation will be considered)

If required for this position, do you have a valid driver's license? ____ Yes ____ No

If required for this position, do you have a CDL? ____ Yes ____ No

Have you previously applied for a position with the Massillon Public Library? ____ Yes ____ No If yes, when? _____

Are you a former employee of Massillon Public Library? ____ Yes ____ No If yes, provide separation date (Mo/Yr) _____

Provide name & relationship of any relative(s) who are employed by Massillon Public Library, or mark "none"

EDUCATION

Name of School/City/State	#Yrs Completed	Circle Completed	GPA	Major/Minor
High School		Diploma Associates Masters	GED Bachelors	
College		Diploma Associates Masters	GED Bachelors	
College		Diploma Associates Masters	GED Bachelors	
Other		Diploma Associates Masters	GED Bachelors	

Please indicate your level of proficiency in the following areas (B = Basic, I = Intermediate, E = Expert).

Microsoft Word _____ Microsoft Excel _____ Microsoft Outlook _____ Internet _____ Intranet _____

Please list any training, computer or software skills, customer service, or any other skills relevant to this position.

Please list any special accomplishments, publications, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.

Professional Affiliations

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.

WORK EXPERIENCE

Please detail your work history for the past ten years. Begin with your current or most recent employer. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments.

Employer Information

Name: _____ Phone: _____

Address _____ Fax _____

Email: _____ Employed From: _____ To: _____

Job Title: _____ Reason for Leaving _____

Job Duties _____

Supervisor Name/Title: _____ / _____

Phone: _____ Email: _____ May we contact? ? Yes No

Other Contact Information: _____

Employer Information

Name: _____ Phone: _____

Address _____ Fax _____

Email: _____ Employed From: _____ To: _____

Job Title: _____ Reason for Leaving _____

Job Duties _____

Supervisor Name/Title: _____ / _____

Phone: _____ Email: _____ May we contact? ? Yes No

Other Contact Information: _____

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Address _____ Fax _____

Email: _____ Employed From: _____ To: _____

Job Title: _____ Reason for Leaving _____

Job Duties _____

Supervisor Name/Title: _____ / _____

Phone: _____ Email: _____ May we contact? ? Yes No

Other Contact Information: _____

REFERENCES

Please provide contact information for three (3) work-related references (other than relatives or former bosses).

Name/Phone: _____ / _____
Email: _____ Occupation: _____
How do you know this person? (Former co-worker, professor, etc.) _____
How long have you known this person? _____

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How long have you known this person? _____

Massillon Public Library is a Drug-Free Workplace

My signature below certifies that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment, if discovered at a later date.

I authorize Massillon Public Library (its officers, agents, representatives, or duly authorized employee(s) to investigate, without liability, all statements contained in this application and supporting materials. I authorize reference and former employers, without liability, to make full responses to any inquiries in connect with this application for employment. I understand that my signature authorizes the Massillon Public Library to contact any current or former employer, educator, or other reference that I have noted on this application, or in my resume.

If requested, I agree to submit to a physical exam, criminal and/or credit background investigation and screen for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment.

I understand that employees of the Massillon Public Library serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with the library and departmental regulations.

Signature of Applicant

Date

(PLEASE NOTE: If you do not sign application, it will not be considered)