

# Crawford County Library System

## Employment Application

**POSITION APPLIED FOR**

### GENERAL INFORMATION

Name (last, first, middle initial)

Today's Date

Street Address

City, State, Zip

Home Phone No.

Work Phone No.

Message Phone No.

Are you authorized to work in the United States? Proof of Authorization will be required post hire.

Yes No

### TRAINING AND EDUCATION

CIRCLE HIGHEST GRADE COMPLETED:      8                      9                      10                      11                      12                      GED

Colleges/other training

Major/subject

Degree/certificates

### ADDITIONAL SKILLS Describe skills relevant to the job for which you are applying

SKILL	TYPE OF EXPERIENCE	LEVEL OF EXPERTISE
Office equipment, computers, software (typing speed, programs, etc.)		
Technical skills, professional licenses		
Heavy equipment, machinery		
Other		

Can you perform the essential functions of the job with or without reasonable accommodation?    Yes                      No

### BACKGROUND INFORMATION

EACH CASE IS CONSIDERED SEPARATELY BASED ON JOB DUTIES AND PERFORMANCE AREAS

Are you bondable?    Yes                      No

### How/where did you hear about the position for which you are applying? (Check one)

\_\_\_\_\_ Friend or relative                      \_\_\_\_\_ Library employee                      \_\_\_\_\_ Michigan Works  
\_\_\_\_\_ Newspaper ad                      \_\_\_\_\_ Library job bulletin                      \_\_\_\_\_ Library job hotline  
\_\_\_\_\_ Other please specify \_\_\_\_\_

## EMPLOYMENT HISTORY

Beginning with your present or most recent employment, list your employment history. Include self-employment, military service, volunteer experience and periods of unemployment. The following sections **MUST** be completed even if a resume is submitted.

Employer		Employed from:	To:
Address:		Supervisor	
Phone	Hours worked/week	Starting salary	
Position		Last salary	
Number of employees supervised by you	May we contact this employer	Supervisor's phone	
Reason for leaving			
Employer		Employed from:	To:
Address:		Supervisor	
Phone	Hours worked/week	Starting salary	
Position		Last salary	
Number of employees supervised by you	May we contact this employer	Supervisor's phone	
Reason for leaving			
Employer		Employed from:	To:
Address:		Supervisor	
Phone	Hours worked/week	Starting salary	
Position		Last salary	
Number of employees supervised by you	May we contact this employer	Supervisor's phone	
Reason for leaving			
<b>PROFESSIONAL REFERENCES</b>		<b>Please list below any people in addition to supervisors listed above who can responsibly evaluate your work performance</b>	
Name	Place of employment/title	Phone	

It is understood and agreed that the foregoing is true to the best of my knowledge, and that my falsification of this application will be grounds for elimination from further consideration or, if employed by the Crawford County Library System, for dismissal. I authorize the Crawford County Library System to solicit information regarding my character, general reputation, credit, previous employment, and similar background information, and to contact any and all references I have given on my application. I release all parties and persons connected with any such request for information from all claims, liabilities, and damages that may arise out of the furnishing of such information. If employed, I release the Crawford County Library System from any liability for future references it may provide regarding my work history at the firm.

I understand that employment with the Employer is "at-will", which means that either the Library or I can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager or executive of the Employer, other than the Library Director has any authority to alter the foregoing.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_