



Employment Application

215 W. Main St.
Van Wert, OH 45891
419-238-2168

Qualified applicants are considered for all positions without regard to race, color, religion, sex, gender, sexual orientation, national origin, age, marital status, veteran status, or the presence of a non-job related medical condition or handicap.

Date of Application: _____

Position(s) Applied For: _____

Department Applying For (Check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Circulation | <input type="checkbox"/> Leadership Team |
| <input type="checkbox"/> Catalog | <input type="checkbox"/> Reference |
| <input type="checkbox"/> Cargo | <input type="checkbox"/> Children's |
| <input type="checkbox"/> Building Services | <input type="checkbox"/> Teens/ Young Adult |

Full Legal Name: _____

Current Address: _____

Phone Number: _____ Email: _____

Are you a citizen of the United States? Yes _____ No _____

If not, do you possess an Alien Registration Card? Yes _____ No _____

If yes, give Alien Registration Number _____

What are you available to work? Full-time _____ Part-time _____ Seasonal _____

What hours are you available to work?

Do you have reliable transportation and are able to travel if the job requires it?

Yes _____ No _____

Do any of your friends or relatives work here? Yes _____ No _____

If yes, list name(s): _____

Employment Experience

List each job held. Start with your present or latest job. Include military service assignments and volunteer activities. (Exclude groups which indicate race, color, religion, sex, gender, sexual orientation, or national origin.) If you need additional space, continue on a separate sheet of paper.

Employer	Dates Employed (MM/YY)		Work Performed
	From	To	
Address			
Job Title	Hourly Rate / Salary		
Supervisor	Starting Rate	Final Rate	
Reason for Leaving			

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Summarize special skills and qualifications acquired from employment or other experience:

Are you a veteran of the U.S. military service? Yes _____ No _____

If yes, what was your Branch of U.S. military service? _____

Special Employment Notice to Disabled Veterans, Vietnam Era Veterans, and Individuals with Physical or Mental Handicaps:

Government contractors are subject to Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1978, as amended, which requires government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals.

If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect any consideration you may receive for employment.

If you wish to be identified, please sign below:

Disabled _____ Disabled Veteran _____ Vietnam Era Veteran _____

Signed _____ Date _____

What foreign languages do you speak, read and/or write fluently, if any?

Give at least three references, two professional and one personal reference. References must not be related to or residing with you. High school students should include at least one teacher.

Name	Address	Phone Number	Relationship

Education

	High School	College/University	Graduate/ Professional
School Name			
Years Completed (circle)	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree			
Describe Course of Study			

Describe specialized training, apprenticeships, skills, and extracurricular activities:

Honors or awards received:

State any additional information you feel may be helpful to us in considering your application:

Agreement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of The Brumback Library.

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian for minors: _____ Date: _____