

677 Lynnwood Dr. • Minerva OH 44657 330-868-4101 • Fax 330-868-4267 www.minervalibrary.info

Application for Employment

The Minerva Public Library is an equal opportunity employer. The Library considers applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. As you complete this application you may omit any information that would reveal your inclusion in any of the groups listed above.

Please print, and comple	etely answer all questions			
Date of Application:				
Position(s) applied for:				
Last Name:	First	Name:	Mido	lle Initial:
Street Address:			PO Box:	
City:	State	e:	Zipcode:	
Phone:	Email address	<u> </u>		-
□Yes Have you ever filled an ap □Yes (Date:		re?	eligibility to wo	rk?
	oyed by this Library before? rtment, and approximate da □No			
	Department:	Dates:	From	To:
Does the Minerva Public I □Yes	_ibrary currently employ any □No	of your relatives?		
Are you currently employe □Yes	ed? □No			
If you are currently emplo □Yes	yed, may we contact your pi □No	resent employer?		

	work in the United States? nmigration status will be required upon employment.) □No			
On what date would you be available to start work?				
Criminal Record				

This employment application does not seek information regarding the applicant's criminal record. However, the Library reserves the right to make inquiry into the applicant's criminal record, to conduct a criminal background check and to condition any offer of employment on the information obtained from any such inquiry or background check. In evaluating an applicant's criminal record, the Library shall make an individualized assessment, utilizing the factors permitted by applicable law.

Education

	School Name & Location	Number of Years Completed	Did you graduate? Yes or No	Diploma or Degree
Graduate Studies				
College				
Trade/Technical				
High School				
Other (specify)				

Employment ExperiencePlease list your work experience beginning with your current or most recent job.

Employer:	Phone Number:
Address:	
Dates employed (please state month and year) From:	
Supervisor's name:	
Your job title and duties:	
Reason for leaving:	
Employer:	Phone Number:
Address:	
Dates employed (please state month and year) From:	
Supervisor's name:	
Your job title and duties:	
Reason for leaving:	
Employer:	Phone Number:
Address:	
Dates employed (please state month and year) From:	
Supervisor's name:	
Your job title and duties:	
Reason for leaving:	
Employer:	Phone Number:
Address:	· · · · · · · · · · · · · · · · · · ·
Dates employed (please state month and year) From:	
Supervisor's name:	
Your job title and duties:	

Additional Information

Summarize job-re	elated skills and qualification	s acquired from emplo	yment, education, or experience.
Nome		References	Work related or Personal?
Name	Address	Phone	work related of Personal?
1.			
2.			
3.			
	Applicant's Cer	tification and Agre	eement
information from w investigation to rel- representatives. I information to the	ease any information they have also release all parties from all	I also authorize anyone regarding me or my em liability for any damage Library from all liability fo	the Library contacts as part of its
and that I or the er the Library reserve including compens	mployer may terminate the relates the right to establish or chan	tionship at any time, with ge the terms or condition me with or without prior i	at my employment is entirely "at will" or without cause; and further, that is of any aspect of my employment, notice. I understand and agree that ent.
I certify that the facts contained in this application are true and complete to the best of my knowledge and understanding, and that, if I am employed by the Minerva Public Library, any false or misleading information given by me on this application or in an interview for employment shall be grounds for my dismissal.			
I certify that I have conditions.	read and fully understood the	foregoing, and that I see	k employment under these
Signature of App	licant:		Date:
Please submit th	e application via email to: brary.info		
or in person or by	y mail to:		

Director, Minerva Public Library 677 Lynnwood Dr. Minerva, OH 44657