

EMPORIA PUBLIC LIBRARY

APPLICATION FOR EMPLOYMENT

Please read all instructions carefully and complete all sections of the application completely and accurately. The Emporia Public Library is an equal opportunity employer and considers all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any legally protected status.

PERSONAL INFORMATION

DATE OF APPLICATION:

Please Print:

Name _____

Last First Middle

Address _____

Number Street City State Zip

Phone Number(s) _____

E-Mail _____

Social Security Number _____ Are you 16 years of age or older? Yes No

Have you served in the U.S. Armed Forces? _____ If yes, state branch of service _____

Honorable Discharge? _____ Are you a member of a National Guard Unit? _____

If yes, how many weeks per year of obligation? _____

Would you accept full-time work? Yes No If yes, please attach a cover letter and resume'
Would you accept part-time work? Yes No If yes, please list hours available on a separate sheet

On what date would you be available to work? _____

Have you ever been employed here before? Yes No Dates _____

Do you have a legal right to be employed in the U.S.? Yes No (If Yes, proof is required.)

Have you ever been convicted of a felony? If yes, please explain.

Special training or skills: (languages, machine operation, etc.) that would benefit you in the job for which you are applying:

EDUCATIONAL BACKGROUND

	Name of School	Graduate		Course of Study
		Yes	No	
High School				
Vocational/Technical/Trade				
College		Year:		
Graduate School		Year:		
Other: Specify				

EMPLOYMENT HISTORY

Company Name	Address	Month/Year	Rate of Pay	Supervisor May we contact?	Duties	Reason for Leaving
		From To		Yes <input type="checkbox"/> No <input type="checkbox"/>		
		From To		Yes <input type="checkbox"/> No <input type="checkbox"/>		
		From To		Yes <input type="checkbox"/> No <input type="checkbox"/>		

PERSONAL REFERENCES

Give the names and addresses of three individuals who have known you well for at least two years and to whom we may refer for a personal reference if necessary.

Name:	Phone Number:	Street
Occupation:	E-Mail:	City
Name:	Phone Number:	Street
Occupation:	E-Mail:	City
Name:	Phone Number:	Street
Occupation:	E-Mail:	City

APPLICANT'S STATEMENT

I certify that the information provided by me on this application for employment is 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.

I understand that if I am employed, any false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant _____ Date _____

Please submit application by mail or in person to:

Support Services Coordinator
 110 E. Sixth Avenue
 Emporia, KS 66801
 620-340-6462
www.emporialibrary.org

Emporia Public Library
 Part-time Employment Information
www.emporialibrary.org

An Emporia Public Library job application will be kept on file for one year. If your personal information or schedule changes, please contact the Support Services Coordinator at 620-340-6460 to update your application.

If you are a STUDENT, please indicate your availability over the next _____ months below:

	Morning (8-Noon or other)	Afternoon (12-5 or other)	Evening (5-8 or other)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

If you are NOT a student, please indicate the hours you are available here:

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	
Other Comments:	

The library's hours of operation are:

Labor Day to Memorial Day:

Monday-Thursday 9 a.m. to 8 p.m.
 Friday-9 a.m. to 6 p.m.
 Saturday-11 a.m. to 5 p.m.
 Sunday-2 to 5 p.m.

Memorial Day to Labor Day:

Monday, Tuesday, Thursday, Friday
 9 a.m. to 6 p.m.
 Wednesday-9 a.m. to 8 p.m.
 Saturday-11 a.m. to 5 p.m.
 Sunday-2 to 5 p.m.