

Chanute Public Library Job Application

Name: _____ Date: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____

Email: _____

General Information

Library hours are Monday--Thursday 9:00 am-7:00 pm (Summer: Close at 6:00 pm), Friday--Saturday 9:00 am -5:00 pm. Staff are required to work some evening and Saturday hours.

What days/hours are you available to work? _____

Date Available to Begin Work: _____

How did you learn about this position? _____

Are you known to employers/references/schools by any other names? No _____ Yes _____

If yes, please list other name(s): _____

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

If No, are you legally authorized to work in the United States? Yes _____ No _____

Do you have any physical, mental or medical impairment that would limit your ability to adequately perform the duties of this position? No _____ Yes _____ If yes, please explain:

Have you ever been convicted of a felony? No _____ Yes _____ If yes, please explain:

Individual circumstances will be considered relative to the job sought.

Education and Skills (Attach additional paper if needed.)

High School/GED:

Name and Location of School: _____

College(s): Degree(s) earned: _____

School Name: _____ Location: _____

Major/Areas of study: _____

Did you graduate? No _____ Yes _____ Date Degree/Certificate Attained: _____

Name and Location of School: _____

Major/Areas of study: _____

Did you graduate? No _____ Yes _____ Date Degree/Certificate Attained: _____

Name and Location of School: _____

Major/Areas of study: _____

Did you graduate? No _____ Yes _____ Date Degree/Certificate Attained: _____

Do you have previous library experience? _____

Describe your computer skills: _____

Describe your customer service skills: _____

Other relevant skills and experience: _____

Employment History Relevant volunteer positions may be included in this section.

Additional paper may be attached, if needed.

Last or current employer: Employer: _____

Dates employed: _____

Supervisor: _____

Supervisor Contact Information: _____

Job Title: _____ Job Duties: _____

Reason for leaving: _____

May we contact your current employer? Yes _____ No _____

Previous employer: Employer: _____

Dates employed: _____

Supervisor: _____

Supervisor Contact Information: _____

Job Title: _____ Job Duties: _____

Reason for leaving: _____

May we contact your previous employer? Yes _____ No _____

Previous employer: Employer: _____

Dates employed: _____

Supervisor: _____

Supervisor Contact Information: _____

Job Title: _____ Job Duties: _____

Reason for leaving: _____

May we contact your previous employer? Yes _____ No _____

References: List 3 or more references (not relatives).

1. **Name:** _____
Reference contact information: _____

How long have they known you? _____ How do they know you: _____

2. **Name:** _____
Reference contact information: _____

How long have they known you? _____ How do they know you: _____

3. **Name:** _____
Reference contact information: _____

How long have they known you? _____ How do they know you: _____

4. **Name:** _____
Reference contact information: _____

How long have they known you? _____ How do they know you: _____

Affirmation

Everything I have stated in this application is truthful. I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize my previous employers, schools, and persons named as references to give any information regarding my employment together with information they may have regarding me, whether or not it is in their records. I agree that Chanute Public Library and its employees and my current/previous employers and their employees shall not be held liable in any respect if an employment offer is not tendered, is withdrawn, or my employment is terminated because of false statements, answers, or omissions made by me in this application. I hereby release said employers, schools, or persons from all liability for any damages whatsoever for issuing this information.

Applicant's Signature: _____ Date: _____