Middle Country Public Library Employment Application



APPLIC	AN <u>I IN</u>	FURMA	ATION							
Last Na	me				First Name			M.I.		
Street A	Address:									
City:					State:		Zip Cod	e:		
Email:					Phone:					
POSITI	ON APP	LYING	FOR:							
Libraria * For Libra		Clerical	Page includ	Cafe	Worker pplication	IT Support*	Custodia	l Guard		
EDUC/	ATIONAI	L BACK	GROUND							
High Sc	hool					Town/State	· p			
Now er	rolled?	YES	NO	Did you gradua	ate? YES	NO				
College	e					Town/State				
Now er	nrolled?	YES	NO	Did you gradua	ate? YES	NO De	gree			
Other						Town/State				
Now er	nrolled?	YES	NO	Did you gradua	ate? YES	NO De	gree			
Except for adjudications as youthful offender, wayward minor or juvenile delinquent, have you been convicted of any crime? NO										
A conviction is not an automatic bar to employment. Each case is considered on its individual merits. Background investigations may be conducted on all candidates considered for employment. A false statement may result in the disqualification of you application in accordance with the provisions of Section 50 of the Civil Service law. You are advised, therefore, to list all such convictions below.										
Were you ever dismissed or discharged from any employment? If yes, why?										
WORK	AVAILA	ABILITY								
	Sund	lay	Monday	Tuesday	Wednesday	Thursday	y Friday	Saturday		
FROM										
то										

We are an Equal Opportunity Employer and do not discriminate in employment of applications for employment on the basis of race, creed, color, gender, religion or religious beliefs, disability, national origin, sexual identity or orientation, genetic information, age, veteran or military status or citizenship of any other category protected by law.

Applications are kept on file for one year from date of submission.

Please list your last three em	EMPLOYMEN I nployers, starting with the most recent. If y	you have n	ever been empl	oyed, enter "n/a"						
Company			Phone							
Address			Supervis Contact							
Job Title			Dates Employ	ed						
Reason for Leaving				<u> </u>						
Company			Phone							
Address			Supervis	sor/						
			Contact							
Job Title			Dates Employ	ed [
Reason for Leaving										
Company			Phone							
Address			Supervis Contact	or/						
Job Title			Dates Employ	ed						
Reason for Leaving										
REFERENCES Please list three references (not family or friends). Required even if you have no current/previous employment.										
Full Name			Phone							
Company			Relationship							
E-mail Address	He	ow long h	as this individu	al known you?						
Full Name			Phone							
Company			Relationship							
E-mail Address	Ho	ow long h	as this individu	al known you?						
Full Name			Phone							
Company			Relationship							
E-mail Address	H	ow long h	as this individu	al known you?						
DISCLAIMER AND SIGNATURE										
I understand that the employer follows an employment-at-will policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment. I understand that to be employed I must be lawfully authorized to work in the United States, and I must show the employer documents that will prove this. I hereby authorize Middle Country Public Library to contact any persons necessary to obtain any and all information related to my past work performance. I affirm that the answers I have given on this application for employment are true, complete and correct to the best of my knowledge. I understand that false information will be considered grounds for immediate dismissal, if I should be employed by the library.										
Signature		Date		Supervisor's Initials at Acceptance						