Gallatin County Public Library

209 West Market Street Warsaw, Kentucky 41095 859-567-2786

www.gallatincountylibrary.org

Employment Application

Please answer all questions as completely as possible. The use of this application does not create a contract between you and the Library, does not indicate that there are positions open, and does not in any way obligate you or the Library. The Library does not discriminate in employment on the basis of race, color, sex, age, disability, religion, national origin, status as a disabled veteran, or because an individual is a smoker or nonsmoker, as long as such individual complies with any workplace policy concerning smoking.

Address				Date/
Address	PLEASE PRINT IN INK OR TY	PE		
Address	Name			Social Security # _ / /
Phone		(First)		· ·
Phone	Address			
Position for which you are applying Full-time Part-time Your Salary Requirement Full-time Part-time Never Full-time Part N			(State)	(Zip Code)
Position for which you are applying Full-time Part-time Your Salary Requirement Full-time Part-time Never Full-time Part N	Phone			
Availability Days:	(Home)		(Work)	(Cell)
Days:	Position for which you are	applying		Full-time Part-time
Days: Regularly Sometimes Never Saturdays: Regularly Sometimes Never Saturdays: Regularly Sometimes Never Never Saturdays: Regularly Sometimes Never Never	Your Salary Requirement	\$ hourly rate	e \$c	⊐ annual salary
Evenings: Regularly Sometimes Never Saturdays: Regularly Sometimes Never Never Saturdays: Regularly Sometimes Never Never	Availability			
Saturdays:	Days:	□ Regularly	□ Sometimes	□ Never
What date are you eligible to begin employment?//	Evenings:	□ Regularly	□ Sometimes	□ Never
Are you legally eligible for employment in the United States? yes no If you are less than 18 years of age, please give your date of birth / / Have you been convicted of a felony within the last 7 years? yes no (Such conviction may be relevant if job related, but does not necessarily disqualify you from employment.) If yes, state date, place, and nature of each conviction Have you ever been known by any other name(s) that the Library will need to know to verify any of the information contained in this application yes no If yes, give name(s) and identify the related school, employer, etc. Have you ever been employed by this Library? yes no If yes, please complete: Dates to Does the Library now employ any of your relatives? yes no If yes, please complete:	Saturdays:	□ Regularly	□ Sometimes	□ Never
If you are less than 18 years of age, please give your date of birth//	What date are you	eligible to begin employme	ent?//_	
Have you been convicted of a felony within the last 7 years?	Are you legally eligible for e	mployment in the United	States? □ yes □	no
(Such conviction may be relevant if job related, but does not necessarily disqualify you from employment.) If yes, state date, place, and nature of each conviction Have you ever been known by any other name(s) that the Library will need to know to verify any of the information contained in this application	If you are less than 18 years	of age, please give your d	ate of birth/_	/
Have you ever been known by any other name(s) that the Library will need to know to verify any of the information contained in this application	•	•	•	
Contained in this application	If yes, state date, place, and	nature of each conviction	·	
Dates to Does the Library now employ any of your relatives?	•	• •	•	• •
Dates to Does the Library now employ any of your relatives?	Have you ever been employ	ed by this Library? □ ves	□ no If ves nlea	ase complete:
			. — по пусо, ріес	ase complete.
Namo(c) Polationship	Does the Library now emplo	by any of your relatives? Dept.	□ yes □ no	If yes, please complete: Relationship

EMPLOYMENT RECORD

List your current or most recent employer first and indicate a continuous record of employment for the last five employers or from the time you left school. If currently employed, may we contact your employer at this time for a □ yes □ no reference? Phone Employer Address Employed (Month/Year) Starting Salary **Ending or Current Salary** Name of Supervisor From / To / Job Title and Duties Reason for Leaving Employer Address Phone Employed (Month/Year) Starting Salary **Ending or Current Salary** Name of Supervisor From / Job Title and Duties Reason for Leaving Address Employer Phone Employed (Month/Year) Starting Salary **Ending or Current Salary** Name of Supervisor From / To / Job Title and Duties Reason for Leaving Address Employer Phone Employed (Month/Year) Starting Salary **Ending or Current Salary** Name of Supervisor From / To / Job Title and Duties Reason for Leaving Employer Address Phone Employed (Month/Year) Starting Salary **Ending or Current Salary** Name of Supervisor From / To / Job Title and Duties Reason for Leaving

EDUCATION

Grade School			ege Graduate School
st all school attended: high sch	ool, technical/vocational scho	ool, college, business, milita	ry, etc. Use another sheet i
School	Did you graduate?	Certification or degree received	Major / Minor subjects
Name			
Address			
	□ No		
Name			
Address	□ Yes		
	□ No		
Name			
Address	□ Yes		
	□ No		
st all current licenses and/or are	SPECIALIZED TRA eas of certification (if not listed		
st all equipment (office, trade, o	or laboratory) that you operate	e proficiently:	
ist any other training, skills, apti eeking at the Library:	·		ype of employment you are
READ CAREFULLY BEFORE SIG	NING		
I certify that the information	n given by me in this application i	s true and complete. I understa	and and agree that any false
formation, misrepresentation, or c	oncealment of the fact is sufficien	·	=
r refusal of employment by the Gall I agree that if I am employe	latin County Public Library. d by the Gallatin County Public Li	brary my employment may be t	terminated at any time witho

Signature _____ Date ____

liability except such wages as may have been earned at the date of my termination. I further understand and acknowledge that this is an application for employment, that no employment contract is being offered and that if I am employed such employment is for

I understand and agree that all information furnished in this application may be verified by the Library. I also understand that any employment is subject to a satisfactory check of references and a Police Department background check. I hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give the Library all information relative to my employment, work habits, and character and hereby release such individuals, organizations, and the

an indefinite period of time and that the Library can change wages, benefits, and conditions at any time.

Library from any liability for any claim or damage that may result.

REFERENCES

Please provide at least one educational, one professional, and one personal reference. You may provide additional references If you like.

Name	Address	Phone	Years known	Relationship
				□ Personal
				□ Educational
				□ Professional
Name	Address	Phone	Years known	Relationship
				□ Personal
				□ Educational
				□ Professional
Name	Address	Phone	Years known	Relationship
				□ Personal
				□ Educational
				□ Professional
Name	Address	Phone	Years known	Relationship
				□ Personal
				□ Educational
				□ Professional
Name	Address	Phone	Years known	Relationship
				□ Personal
				□ Educational
				□ Professional
Name	Address	Phone	Years known	Relationship
Name	Addiess	Filone	rears known	
				□ Personal
				□ Educational
				□ Professional
TO BE COMPLETED BY I	NTERVIEWER			
TO DE COIVII LETED DI II	IVI EIVVIEVVEIV			
DATE OF INTERVIE	:W			
REFERENCES CHEC	CKED			
POSITION OFFERE	D			
HIRED BY				
START DATE				
STARTING RATE/S.	ALARY			
RAISE/DATE				