

# INKSTER PUBLIC LIBRARY

## APPLICATION FOR EMPLOYMENT

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### Instructions to Applicant

1. Applicants may be required to submit to a drug and alcohol screening test.
2. The information you provide on this application is used in our search of applicant credentials for position vacancy requirements. Please be sure that your responses are complete and legible. PLEASE TYPE OR PRINT.
3. The attached original application form must be completed in its entirety even though the information may be contained in your resume. Unauthorized copies of this application are unacceptable and will disqualify you from consideration. Do not include extraneous information not requested by this form. It is the policy of Inkster Public Library not to hire a person who would be employed simultaneously by another employer. You will be disqualified from consideration if your answers on this application form are nonresponsive, or if you include extraneous information.
4. Filing an application provides no assurance that you will be interviewed or hired.
5. Applications will be considered "active" for ninety (90) days, after which time a new application will be required for further consideration for vacancies.
6. Upon request, Inkster Public Library will make reasonable accommodations to assist you in completing this application or participating in the application and interview process.
7. It is the policy of Inkster Public Library to provide equal opportunity in employment to all applicants and employees. No person will be discriminated against in employment because of religion, race, color, national origin, age, sex, height, weight, marital status, military status, arrest record, or a mental or physical handicap, provided that such handicap does not prevent an individual from performing the essential functions of the job, with or without reasonable accommodation.
8. If you should need any accommodation, you should notify a company representative as soon as possible. Such notification must be made in writing, within one hundred eighty-two (182) days after your need for accommodation is known, in order to preserve your rights under Michigan law.

<b>PERSONAL INFORMATION</b>		
Last Name, First, Middle Initial		
Present Address		
Permanent Address (if different from present address)		
Phone No.		
Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Please list all other names by which you have been known to allow us to check your references		
<b>EMPLOYMENT DESIRED</b>		
Position Desired	Date you can start	Salary or hourly wage desired
Preferences: <input type="checkbox"/> Days <input type="checkbox"/> Part Time <input type="checkbox"/> Irregular <input type="checkbox"/> Afternoons <input type="checkbox"/> Full Time <input type="checkbox"/> On Call <input type="checkbox"/> Nights	Can you work:    Weekends? <input type="checkbox"/> Yes <input type="checkbox"/> No Holidays? <input type="checkbox"/> Yes <input type="checkbox"/> No Overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, may we inquire of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever applied to or worked for Inkster Public Library before? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, when?		

## EDUCATION

### HIGH SCHOOL

Name of School	City & State	Did you Graduate?

### COLLEGE, TRADE, BUSINESS OR PROFESSIONAL SCHOOLS

Name of Institution	City & State	Did you Graduate?	Degree

Do you have any other educational training, degrees, honors, special training, skills or other relevant experiences?

Yes  No If yes, please describe

## EMPLOYMENT HISTORY

Please provide an accurate and complete employment history.  
(List current or most recent job first, attach additional sheet if necessary.)

Employer	Address	Phone	
From	To	Reason for Leaving	
Job Title	Starting Wage	Final Wage	Supervisor
Employer	Address	Phone	
From	To	Reason for Leaving	
Job Title	Starting Wage	Final Wage	Supervisor
Employer	Address	Phone	
From	To	Reason for Leaving	
Job Title	Starting Wage	Final Wage	Supervisor

## SPECIALIZED SKILLS

(if any of the following apply- please check)

- |   |                                       |   |                                     |
|---|---------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Computer Proficiency | <input type="checkbox"/> Word         | <input type="checkbox"/> Excel                | <input type="checkbox"/> PowerPoint |
| <input type="checkbox"/> Access               | <input type="checkbox"/> Publisher    | <input type="checkbox"/> Dewey Decimal System | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Cashier              | <input type="checkbox"/> Receptionist | <input type="checkbox"/> Keyboarding/Typing   | <input type="checkbox"/> Calculator |
| <input type="checkbox"/> Other: _____         |                                       |   |                                     |

## REFERENCES - (do not include relatives or former employers)

Name	Address	Phone Number	Years Acquainted
1.			
2.			

**GENERAL**

- 1. Are you a United States citizen?  Yes  No  
If no, are you authorized to work in the United States?  Yes  No
- 2. Are you now or have you ever been a member of a branch of the Armed Forces of the United States, a State Militia, the National Guard or the Reserves?  Yes  No  
If yes, please describe (include type of discharge if applicable):
- 3. Have you ever been denied a surety bond?  Yes  No
- 4. Have you ever been convicted of a crime (exclude minor traffic violations)?  Yes  No  
If yes, describe when, where, and the nature of the offense:
- 5. Are there any felony charges currently pending against you?  Yes  No  
If yes, describe when, where and the nature of the offense.
- 6. Are any of your relatives currently employed by Inkster Public Library?  Yes  No  
If yes, please provide their name(s) and relationship(s) to you:
- 7. How did you hear about job opportunities with Inkster Public Library?
- 8. Have you a signed a nondisclosure or non-compete agreement with any prior or current employer?  
 Yes  No If yes, explain:
- 9. Name of person to notify in case of emergency:  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

**ACKNOWLEDGMENTS**

- I authorize investigation of all statements contained herein, including investigation of statements concerning my previous employment. I certify that the information I have provided in this application is true and complete to the best of my knowledge and understand that, if I am employed, false or misleading statements on this or any other Library document shall result in immediate dismissal, regardless of the date the false or misleading statement is discovered.
- I authorize you to verify the information I have provided, including contacting the references and former employers listed above. I authorize all former employers, references, and other persons or agencies to provide to you any information they have regarding me without receiving written notice from me. I release from all liability any person, employer or agency providing information pursuant to this authorization. I waive any right to written notice by my present and former employers that discloses information about me.
- I agree to submit to a drug and alcohol screening test as a pre-condition to employment with Inkster Public Library and understand that I will not be hired if I test positively for alcohol or a controlled substance, unless that substance is present due to a legitimate and verifiable prescription. I understand that the use of any drug or alcohol during working hours or an appearance at work under the influence of drugs or alcohol will result in immediate termination. I understand that a refusal to take a drug or alcohol test if directed to do so by management or supervision, will also result in immediate termination.
- I understand and agree that, if hired, my employment would be at will which means that it would be for no definite period, that I retain the right to terminate my employment at any time, with or without prior notice and with or without cause, and that Inkster Public Library retains the same right. I understand that no oral or written communication, other than a written communication signed by the President of Inkster Public Library may alter or modify my at-will employment status with Inkster Public Library.
- I understand and agree that, where permissible under applicable law, any and all claims relating to my employment or separation from employment must be raised within 182 days of the event giving rise to the claim(s) or will be forever barred.

Dated: \_\_\_\_\_

Signature \_\_\_\_\_