

TECUMSEH DISTRICT LIBRARY

215 North Ottawa Street

Tecumseh, MI 49286

517-423-2238

EMPLOYMENT APPLICATION

Tecumseh District Library is an equal opportunity employer and will not discriminate against any applicant on the basis of any characteristic that is protected by State or Federal law. Michigan law requires that a person with a disability or handicap requiring accommodation to perform the essential duties of the job must notify the employer in writing within 182 days of the date that the need is known or should have been known.

Personal Information

Full Name _____

Date _____

Address _____

Telephone, Home _____

City, State, ZIP _____

Telephone, Business _____

Social Security Number _____

Position applied for _____

Are you lawfully entitled to be employed in the United States? Yes ____ No ____

Are you at least 18 years of age? Yes ____ No ____

If not, can you provide a valid work permit? Yes ____ No ____

Education

High School Diploma/ GED? Yes ____ No ____ If No, expected graduation date _____

	Name/Address	Yrs. Completed/ Yrs. Attended	Diploma Degree	Course of Study
Vocational/ Training				
College				
Graduate				
Other				

Any other educational training _____

If applying for a position that requires a Master's Degree in Library Science (MLS), please enter which state or Library of Michigan certificate was issued to you: _____

Employment History

List all present and past employers for whom you have worked during the past ten years. If you have held more than one position for the same employer, list each position separately. Account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. Attach additional sheets if more space is needed.

Present/Last Employer:

Address (Street, City, State)		Telephone () _____	
		May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Employment Dates (Mo./Yr.) From _____ To _____	Starting Salary \$ _____ per _____	Current/Ending Salary \$ _____ per _____	Supervisor's Name
Job Title:			
Description of Job Duties: _____ _____ _____			
Reason for leaving:			

Previous Employer:

Address (Street, City, State)		Telephone () _____	
		May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Employment Dates (Mo./Yr.) From _____ To _____	Starting Salary \$ _____ per _____	Current/Ending Salary \$ _____ per _____	Supervisor's Name
Job Title:			
Description of Job Duties: _____ _____ _____			
Reason for leaving:			

Previous Employer:

Address (Street, City, State)		Telephone () _____	
		May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Employment Dates (Mo./Yr.) From _____ To _____	Starting Salary \$ _____ per _____	Current/Ending Salary \$ _____ per _____	Supervisor's Name
Job Title:			
Description of Job Duties: _____ _____ _____			
Reason for leaving:			

Present/Last Employer:

Address (Street, City, State)		Telephone () _____	
		May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Employment Dates (Mo./Yr.) From _____ To _____	Starting Salary \$ _____ per _____	Current/Ending Salary \$ _____ per _____	Supervisor's Name
Job Title:			
Description of Job Duties: _____ _____ _____			
Reason for leaving:			

Other Experience

<p>List any professional, trade, business, volunteer or civic activities and offices that you feel further qualifies you for the position for which you are applying. (Exclude organizations/memberships which reveal race, color, religion, national origin, sex, disability or other protected status.)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Special Skills, Experience or Qualifications

Place a check mark next to the skills you possess.

- Word Processing Spreadsheets Databases
- Data Entry Graphics Internet
- Configuration of PC/Peripherals
- Install/Troubleshoot Software problems
- Troubleshoot Printer/Hardware problems

Computer software you can operate: _____

Computer hardware you can operate: _____

Office equipment you can operate: _____

Additional Information

List any other names under which you may have been employed: _____

Have you ever been convicted of a felony? No ___ Yes ___ Explain:

Are there any pending felony charges against you? No ___ Yes ___ Explain:

State any additional information that you feel may be helpful to us in considering your application.

Professional References: (exclude family members)

Name	Address	Telephone Number	Length and Type of Relationship

Affidavit

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize investigation of all statements contained in this application for any employment-related purpose. I also authorize, whether listed or not, any person, school, employers (except as those specifically noted), and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from all liability for any information they may provide.

Tecumseh District Library, in accordance with Michigan State law, is an "at will" employer. If hired, I understand and agree that my employment will be "at will" and therefore may be terminated with or without cause and with or without notice.

I understand that no manager or representative of Tecumseh District Library, other than the Library Director or Library Board of Trustees, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I agree that any action or suit against the Library arising out of my employment or termination of employment, including, but not limited to, claims arising under state or federal civil rights statutes, must be brought within 301 days of the event giving rise to the claims or be forever barred. I waive any limitation period to the contrary.

Applicant Signature

Date

Please supplement this record with a résumé, references or any additional information that you feel will aid in our evaluation of your qualifications.

Thank you for your interest in the Tecumseh District Library.