



Application for Employment

Great Neck Library is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status, or other characteristic protected by Law.

PERSONAL:

Date: _____ Available Start Date: _____

Position Desired: _____ Hourly Rate/Salary Desired _____

Name: _____

Street Address: _____

City/State/Zip: _____ Phone Number: _____

Email: _____

How did you hear about Great Neck Library? _____

If you are under the age of 18 years old, do you have working papers _____ Yes _____ No

Have you ever filed an application with us before? _____ Yes _____ No

Have you ever been employed by us before? _____ Yes _____ No

On what days/times are you available to work?

Full Time Part Time Either

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Mornings Afternoon Evenings

Main Lakeville Station Parkville

EDUCATION:

Schools/Colleges Attended:

Degree

High School _____

College _____

Grad/Prof'l _____

Other _____

Additional Educational Information: _____

EMPLOYMENT HISTORY

Employer: _____

Job Title: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: _____

Describe Duties/Responsibilities/Accomplishments: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): From: _____ To: _____

May we contact this employer? Yes _____ No _____

Employer: _____

Job Title: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: _____

Describe Duties/Responsibilities/Accomplishments: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): From: _____ To: _____

May we contact this employer? Yes _____ No _____

Employer: _____

Job Title: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: _____

Describe Duties/Responsibilities/Accomplishments: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): From: _____ To: _____

May we contact this employer? Yes _____ No _____

SPECIAL SKILLS: Describe any special skills or qualifications:

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize the Company to verify their accuracy and to obtain reference information on my work performance. I hereby release the Great Neck Library from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I further authorize any former or present employer and former school to provide Great Neck Library any and all information including but not limited to information as to my character, habits, work ability and/or education.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Great Neck Library to hire me.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

I understand that this application remains current for only six months. At the conclusion of that time if I have not heard from the Great Neck Library and still wish to be considered for employment, it will become necessary for me to reapply and fill out a new application.

Signature of Applicant: _____

Date: _____

State former name or any other name(s) by which you were known _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview: _____ Yes _____ No

Remarks: _____

Interviewer 1	Name: _____	Date: _____
Interviewer 2	Name: _____	Date: _____
Interviewer 3	Name: _____	Date: _____

Employed: _____ Yes _____ No Effective Date: _____

Position: _____ Salary: _____ Department _____