



If you have any friends or relatives working for Morrisson-Reeves Library, please list them:

Employment History

List your last four (4) employers, assignments or volunteer activities, starting with the most recent. Explain any gaps in employment in comments section below.

Employer (current or most recent) _____
Address _____
Job Title _____ Telephone _____
Immediate Supervisor and Title _____
Dates Employed From ____/____/____ To ____/____/____
Hourly Rate/Salary Start \$ _____ Final \$ _____
Reason for Leaving _____
Summarize the nature of the work performed and job responsibilities. _____

Employer (Previous) _____ Telephone _____
Address _____ Job Title _____
Immediate Supervisor and Title _____
Dates Employed From ____/____/____ To ____/____/____
Hourly Rate/Salary Start \$ _____ Final \$ _____
Reason for Leaving _____
Summarize the nature of the work performed and job responsibilities. _____

Employer (Previous) _____ Telephone _____
Address _____ Job Title _____
Immediate Supervisor and Title _____
Dates Employed From ____/____/____ To ____/____/____
Hourly Rate/Salary Start \$ _____ Final \$ _____
Reason for Leaving _____
Summarize the nature of the work performed and job responsibilities. _____

Employer (Previous) _____ Telephone _____
Address _____ Job Title _____
Immediate Supervisor and Title _____
Dates Employed From ____/____/____ To ____/____/____
Hourly Rate/Salary Start \$ _____ Final \$ _____
Reason for Leaving _____
Summarize the nature of the work performed and job responsibilities. _____

Comments (including explanation of any gaps in employment.) _____

Other Experience Please list any other experience, skills, or qualifications that would especially fit your work at the library: _____

Please list any community and/or school activities that you are, or have been, involved with. _____

Educational Background

High School or Equivalent:

Name _____ Location/ Address: _____

9 10 11 12 High School Diploma GED
Circle highest grade completed:

College or Vocational:

Name _____ Location/ Address: _____

1 2 3 4 Circle years completed:
Major _____ Minor _____
Degree _____

Graduate / Professional School:

Name _____ Location/ Address: _____

Degree _____
Major _____

References:

List three business/work references who are NOT related to you and are NOT previous supervisors.

Name _____ Years Known _ _____
Address _____
Home Phone (_____ Office Phone _____
Relationship _____

Name _____ Years Known _ _____
Address _____
Home Phone _____ Office Phone _____
Relationship _____

Name _____ Years Known _ _____
Address _____
Home Phone (_____ Office Phone _____
Relationship _____

Morrisson-Reeves Library Employment Application

I certify that all information I have provided in order to apply for and secure work with Morisson-Reeves Library is true, complete and correct. I understand and agree that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause for cancellation of this application and/or termination from Morisson-Reeves Library if I have been employed. Furthermore, I understand that just as I am free to resign at any time, Morisson-Reeves Library reserves the right to terminate my employment at any time, with or without reason or cause and without prior notice. I understand that no representative of Morisson-Reeves Library has the authority to make assurances to the contrary.

I expressly authorize, without reservation, Morisson-Reeves Library, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions to verify the accuracy of all information provided by me in this application, resume or job interview including, but not limited to, my performance, character, reputation, and previous employment record. I hereby release from liability Morisson-Reeves Library, its representatives, employees or agents for seeking, gathering and using such information in the employment process and all other persons, organizations and corporations for furnishing such information about me.

I authorize Morisson-Reeves Library to make any pre-employment investigation of my personal history, driving record, financial, criminal history and sexual offender registries through any investigative or credit agencies or bureaus of their choice. I hereby release Morisson-Reeves Library and its representatives and all other persons, agencies and bureaus from any liability or damages for having requested or furnished such information.

Morisson-Reeves Library is an Equal Opportunity Employer and does not discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from Morisson-Reeves Library and still wish to be considered for employment, it will be necessary to reapply and complete a new application.

Signature of Applicant

Date

Additional comments or a résumé by the applicant may be attached, if desired.

Voluntary Affirmative Action Information

(Completion of information below is voluntary)

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

Date _____/_____/_____

Position(s) applied for _____

Referral Source

___Advertisement___Employee___Relative___Walk-in___School___Internet

___Government Employment Agency___Private Employment Agency___Other

Name of Source (if Applicable) _____

Applicants name _____
Last First Middle Area Code Phone

Address _____
Street City State Zip Code

As required, we comply with government regulations including Affirmative Action obligations where they apply.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations, we ask that you complete this application data survey. Your cooperation is appreciated.

Please be advised that your survey is not part of your official application for employment. It is considered confidential information that will not be used in any hiring decision.

Check one: ___Male___Female

Check one of the following Race/Ethnic Group

___Hispanic___Black___White___American Indian/Alaskan Native___Asian/Pacific Islander

SPECIAL NOTICE TO VIETNAM ERA VETERANS, DISABLED VETERANS AND INDIVIDUALS WITH PHYSICAL OR MENTAL HANDICAPS OR DISABILITIES:

Government contractors subject to the Vietnam Era Veterans Readjustment Act of 1974 and The Rehabilitation Act of 1973 are required to take affirmative action to employ and advance in employment qualified veterans and veterans of the Vietnam Era, and qualified handicapped individuals.

You are invited to volunteer this information, if you qualify, to assist in proper placement and determining reasonable accommodation. This information will be considered confidential, and refusal to provide this information will not adversely affect your consideration for employment.

IF YOU DO WISH TO BE IDENTIFIED, PLEASE CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE:

___VIETNAM ERA VETERAN___DISABLED VETERAN___HANDICAPPED INDIVIDUAL

To be completed by applicant - Not for interview purposes - To be filed separately from application.

This information is used to satisfy the Affirmative Action requirements of Section 503 of the Rehabilitation Act or necessitated by another federal law or regulation