Applications are considered for all positions without regard to race, color,

**Application for Employment**

religion, creed, gender, national origin, disability, marital status or veteran

 status. If you need assistance or reasonable accommodation during the

process, call (417) 637-5334.

**Personal Information**

|  |  |
| --- | --- |
| **Last Name First Middle Initial** | **Date** |
| **Street Address** | **Primary Phone #** |
| **City, State, Zip** | **Other Phone #** |
| **Email Address** |
| **Have you ever applied for employment with Dade County Library? If so, when?**  | **Position Applying For:** |
| **How did you discover that a position was available?** |
| **Are you legally eligible for employment in the US?** **Yes No**  | **Do you have relatives that work or have worked for Dade County Library?** |

 **Education**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **School****Level** | **Name and Location of School** | **Primary****Course of Study/Major** | **Number of Years Completed** | **Did You Graduate?** | **Diploma****Or** **Degree** |
| **High****School** |  |  |  |  |  |
| **Post****High****School** |  |  |  |  |  |
| **Additional****Education** |  |  |  |  |  |

**Employment History**

Please provide accurate, full-time or part-time employment history. Begin with the most recent employment. Provide up-to-date contact information for former employers as DCL will contact.

|  |  |  |
| --- | --- | --- |
| **1** | **Employer Name** | **Contact Telephone #** |
| **Address** | **Employed (month and year)****From\_\_\_\_\_\_\_\_\_\_\_To\_\_\_\_\_\_\_\_\_\_** |
| **Name and Title of Supervisor** | **Hourly Pay** | **# Hours/week** |
| **State job title and/or Describe your duties.** | **Reason for leaving.** |

|  |  |  |
| --- | --- | --- |
| **2** | **Employer Name** | **Contact Telephone #** |
| **Address** | **Employed (month and year)****From\_\_\_\_\_\_\_\_\_\_\_To\_\_\_\_\_\_\_\_\_\_** |
| **Name and Title of Supervisor** | **Hourly Pay** | **# Hours/week** |
| **State job title and/or Describe your duties.** | **Reason for leaving.** |

|  |  |  |
| --- | --- | --- |
| **3** | **Employer Name** | **Contact Telephone #** |
| **Address** | **Employed (month and year)****From\_\_\_\_\_\_\_\_\_\_\_To\_\_\_\_\_\_\_\_\_\_** |
| **Name and Title of Supervisor** | **Hourly Pay** | **# Hours/week** |
| **State job title and/or Describe your duties.** | **Reason for leaving.** |

**Skills**

Please rate each skill based on your current skill set. Indicate proficiency level.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Skill | UseDaily | Use Occasionally | NeverUsed | List other skills/qualifications you possess |
| **Computer Keyboarding** |  |  |  |  |
| **Microsoft Applications****Windows** |  |  |  |  |
| **Microsoft Applications****Word** |  |  |  |  |
| **Microsoft Applications****Excel** |  |  |  |  |
| **Microsoft Applications****Publisher and Powerpoint** |  |  |  |  |
| **Email** |  |  |  |  |
| **Internet****Searching** |  |  |  |  |

**Civic Responsibilities/Hobbies**

Exclude information that may be considered discriminatory.

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**Security**

Prior to becoming an employee of the Dade County Library, a comprehensive background check may be conducted. It may consist of prior employment verification, professional reference checks, and education confirmation. A criminal, health examination (including drug usage), and/or driving record history may also be obtained.

Have you been convicted of or served time for a felony in the past ten years? **NO YES**, if yes describe below.

|  |  |  |
| --- | --- | --- |
| **When** | **City/State** | **Charge/Conviction** |
|  |  |  |
|  |  |  |

**References**

Please list at least one character reference and one or more employment references. Do not include family members. List references who have knowledge of your work habit and skills.

Be sure to have up-to-date contact information.

|  |  |  |
| --- | --- | --- |
| 1 | **Name** | **Telephone Number:** |
| **Email Address:** |
| **Relationship** | **Title or Position** |

|  |  |  |
| --- | --- | --- |
| 2 | **Name** | **Telephone Number:** |
| **Email Address:** |
| **Relationship** | **Title or Position** |

|  |  |  |
| --- | --- | --- |
| 3 | **Name** | **Telephone Number:** |
| **Email Address:** |
| **Relationship** | **Title or Position** |

**Applicant Statement**

Please read the following statement carefully.

**Notice of Nondiscrimination:** Dade County Library does not discriminate on the basis or race, color, religion, national origin, ancestry, gender, age, disability, or any other protected status.

Have you, the applicant, read and understood the requirement of this job? YES NO

I certify that the above statements are correct. I understand that any false information or omissions in this application, or its supporting documents, will be sufficient grounds for refusal to hire or for termination without notice. I understand that Dade County Library has the right to review my education, previous employment, and/or background information including, bus not limited to, the financial status of my DCL library account as may be necessary in arriving at an employment decision. I hereby understand that, unless otherwise defined by applicable law, any employment relationship with DCL is of an “at will” nature, which means that an employee may resign or be discharged at any time with or without cause. There will be a three (3) probationary period.

 Should Dade County Library decide to perform an inquiring reference check, I authorize said library to do so. I release my former employers and Dade County Library from any liability incurred from the information obtained.

 I certify that I have read, fully understand, and accept all terms of the forgoing Applicant Statement.

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 Applicant Signature Date