

TONGANOXIE PUBLIC LIBRARY

303 S. Bury St.
Tonganoxie, KS 66086
(913) 845-3281 Fax: (913) 845-2962
Website: <http://www.tonganoxielibrary.org>

APPLICATION FOR EMPLOYMENT

Section 1 Personal details

Title:		Last Name:	
First Names:			
Address:			
Zip Code:			
Home Telephone Number:			
Mobile Telephone Number:			
E-mail address:			
Do you have the legal right to work permanently in the United States?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Are you under the age of 16?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Name of any relative(s) employed by the Library: Relationship:			
Have you ever been employed by this library?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Section 2 Position Objective

For what position(s) are you applying?				
Minimum salary requirement:				
Are you interested in: (mark all that apply) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary	Hours Available:			
		Morning	Afternoon	Evening
	M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	T	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	W	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	T	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sun		<input type="checkbox"/>	<input type="checkbox"/>	

Section 3 Education

Check highest grade completed:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		9	10	11	12	1	2	3	4	5+
		High School				College				
School (write below)	Credit Hours	Did you graduate?	Certification or Degree Received		Major Subject					

Special Skills and Qualifications

Summarize special training, skills, and proficiencies (i.e.: typing):
List all computer software in which you are proficient and describe level of competency:
List any honors, scholarships, fellowships, and/or publications:
List any foreign languages read, written or spoken and indicate fluency:
Any other information you feel pertinent to the position for which you are applying:
Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide details:

Section 4 Employment Record

Please list chronologically, starting with current or last employer. Please use additional pages, if necessary.

Name of Employer	Address	Phone
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Employed From: To:	Starting Salary	Ending Salary	Name of Supervisor
Job Title		Reason for Leaving	
Duties		May we contact this employer?	

Name of Employer	Address	Phone
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Employed From: To:	Starting Salary	Ending Salary	Name of Supervisor
Job Title		Reason for Leaving	
Duties		May we contact this employer?	

Name of Employer	Address	Phone
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Employed From: To:	Starting Salary	Ending Salary	Name of Supervisor
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Name of Employer	Address	Phone
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Employed From: To:	Starting Salary	Ending Salary	Name of Supervisor
Job Title		Reason for Leaving	
Duties		May we contact this employer?	

Section 5 Professional References

Please furnish the names and addresses of three people to whom you are not related and who can attest to your work performance.

Reference 1

Name:			
Their Position (job title):		Relationship:	
Organization:			
Telephone:		E-mail:	

Reference 2

Name:			
Their Position (job title):		Relationship:	
Organization:			
Telephone:		E-mail:	

Reference 3

Name:			
Their Position (job title):		Relationship:	
Organization:			
Telephone:		E-mail:	

Section 6 Pre-Employment Statement

I certify that the information given by me in this application is true and complete. I understand and agree that any false information, misrepresentation, or concealment of fact is sufficient grounds for either my immediate discharge without recourse or refusal of employment by the Tonganoxie Public Library.

In consideration of my employment, I agree to conform to the rules and regulations of the Tonganoxie Public Library, and my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either the Library or myself. I understand that no manager or representative of Tonganoxie Public Library, other than the Library Director or Board, as any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

Signed:		Date:	
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Please supplement this record with a resume or any additional information that you feel will aid in our evaluations of your qualifications.