

EMPLOYMENT APPLICATION

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a library representative.

Position(s) applied for _____ Date of application _____

Referral Source ☐ Newspaper Ad ☐ Employee ☐ Relative ☐ Government Employment Agency

☐ Walk-In ☐ Private Employment Agency ☐ Online

Name of source (if applicable) _____

PERSONAL INFORMATION

Name _____
LAST FIRST MIDDLE

Address _____ Social Security # _____

Telephone # _____ Message Phone _____ E-mail Address _____

Are you 18 years or older? ☐ Yes ☐ No (If No, can you furnish a work permit?) ☐ Yes ☐ No

Have you ever been employed by Grand Ledge Area District Library? If yes, give dates..... ☐ Yes ☐ No

Are you legally eligible to work in the United States? ☐ Yes ☐ No

Date available for work? ____/____/____ What is your desired salary range? \$ _____

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? ☐ Yes ☐ No
If yes, please provide date(s) and details _____

Is anyone related to you employed by the Grand Ledge Area District Library? ☐ Yes ☐ No
If yes, please give name and relation to you. _____

SPECIAL SKILLS AND QUALIFICATIONS

List any training, skills, language abilities, licenses and/or certificates that may qualify you as being able to perform job related functions in the position for which you are applying. _____

EDUCATIONAL BACKGROUND

Name and Location	Years of Attendance	Did You Graduate?	Course of Study
High School			
College			
Other			

EMPLOYMENT HISTORY (List your past 3 employers, starting with the most recent)

From	To	Employer	Telephone # ()
Position Title		Address	
Supervisor Name & Title		Nature of work performed and job responsibilities	
May We Contact For References: ____ Yes ____ No ____ Later		Hourly Rate/Salary Start \$ Hr/ Wk / Yr Final \$ Hr / Wk / Yr	
Reason for Leaving			

From	To	Employer	Telephone # ()
Position Title		Address	
Supervisor Name & Title		Nature of work performed and job responsibilities	
May We Contact For References: ____ Yes ____ No ____ Later		Hourly Rate/Salary Start \$ Hr/ Wk / Yr Final \$ Hr / Wk / Yr	
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May We Contact For References: ____ Yes ____ No ____ Later		Hourly Rate/Salary Start \$ Hr / Wk / Yr Final \$ Hr / Wk / Yr	
Reason for Leaving			

REFERENCES (List 3 personal references other than family members)

Name and Address	Telephone	Relationship	Yrs Known
	()		
	()		
	()		

APPLICANT STATEMENT

I certify that all the information provided above is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to 1) cancel further consideration for the position applied for, or 2) immediately discharge me from my current position and the employer's service, whenever discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, my resume, or my job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering, and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 60 days.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorize to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

If I am hired, I understand I will be required to fill out an I-9 form and will be required to provide proof of identity and legal authority to work in the United States, as requested by this form.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

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

Signature of Applicant _____ Date ____/____/____

HISTORY OF GRAND LEDGE AREA DISTRICT LIBRARY

The Grand Ledge Public Library was originally established in 1912, and in July of 2000 became a district library. The library's primary service area includes the City of Grand Ledge, Charter Township of Oneida, and parts of Riley, Watertown, Eagle and Westphalia Townships.

Mission Statement

The Grand Ledge Area District Library will acquire and make readily available resources in a variety of formats, including appropriate technology, to meet the educational, recreational and informational needs of the community it serves.

Vision Statement

The Grand Ledge Area District Library affirms its commitment to enhance life-long learning and well-being for all its citizens.

GRAND LEDGE AREA DISTRICT LIBRARY

131 East Jefferson Street

Grand Ledge, MI 48837

<http://gladl.org>

(517) 627-7014

Please send completed applications to admin@gladl.org

If you have any further questions regarding this application or the position you are applying for, you may contact:

Ann Burch, (517) 627-7014