Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

Position(s) Applied For: Date of Application How Did You Learn About Us? Legal Last Name			
Date of Application			
How Did You Learn About Us?			
Legal Last Name	Logal First Nama		
Legal Last Name	Logal First Nama		
Legal Last Name	Logal First Nama		
	Legai Filst Name	Legal Middle Name	
Address (Number) Street	City	State	Zip Code
Telephone Number(s)	F-mail Address		
f you are under 18 years of age, can you pro	ovide required proof of your eligibility to	work? Yes	No
Have you ever filed an application with us be	efore?YesNo If Y	es, give date	
Have you ever been employed with us before	e? tes no it tes	, give date	
Are you currently employed?Yes	No		
May we contact your present employer?	Yes No		
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Can you provide proof of eligibility for employ <i>Proof of citizenship or immigration status will</i>		s <u> </u>	
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Our code at all at a consolidation of the Code of the	</p		
On what date would you be available to work			
On what date would you be available to work Are you available to work: Full Tim	nePart TimeTemporary	1	

Education

High School
School Name and Location
Years Completed
Diploma / Degree
Describe Course of Study
Describe any specialized training, extracurricular activities, skills, and honors you have received.
Undergraduate College / University
School Name and Location
Years Completed
Diploma / Degree
Describe Course of Study
Describe any specialized training, extracurricular activities, skills, and honors you have received.
Graduate / Professional
School Name and Location
Years Completed
Diploma / Degree
Describe Course of Study
Describe any specialized training, extracurricular activities, skills, and honors you have received.
List professional, trade, business or civic activities and offices held. You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer					
Address					
Telephone Number(s)					
Job Title	Dates Employed	Hourly Rate/Salary			
Supervisor	From To				
Reason for Leaving					
Work Performed					
Employer					
Address					
Telephone Number(s)					
Job Title	Dates Employed	Hourly Rate/Salary			
Supervisor	From To				
Reason for Leaving					
Employer					
Job Title	Dates Frankright	Hourly Rate/Salary			
	From	<u> </u>			
SUDERVISOR		I IIIQI			
Supervisor					

References

Give the name, address and telephone number of three personal and/or employment references who are not related to you.

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Have you ever had any job-related training in the United States military? Yes No
If Yes, please describe
Can you perform the duties of the job in which you wish to be employed, with or without accommodation?
☐ With Accommodation ☐ Without Accommodation
Please describe accommodations needed
Special Skills and Qualifications Summarize special job-related skills and qualifications acquired from employment or other experience.
Applicant Statement authorize The Farmington Community Library the right to contact any past employers or their agents regarding references and personnel record information. I authorize present and former employers and individuals I have listed as personal references, to furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities and other qualities pertinent to my qualifications for employment, hereby eleasing them and the Farmington Community Library from any and all liability for damages arising from furnishing the requested information.
certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed one year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applicants are being accepted at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an 'at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I agree and understand that any employment offer may be conditional upon the results of post-offer medical examination. I understand, also, that I am required to abide by all rules and regulations of the employer.
Signature of Applicant Date

FARMINGTON COMMUNITY LIBRARY
www.farmlib.org

Main Library 32737 W. 12 Mile Road Farmington Hills, MI 48334 (248) 553-0300 **Farmington Branch** 23500 Liberty Street Farmington, MI 48335 (248) 553-0321