



JEFFERSONVILLE TOWNSHIP PUBLIC LIBRARY EMPLOYMENT APPLICATION

Employment applications are required. Résumés may not be substituted. Applications should be submitted via email to Taylor Curtis at tcurtis@jefflibrary.org or by mail to:
Jeffersonville Township Public Library
Attention Human Resources
P.O. Box 1548
Jeffersonville, IN 47131-1548

Answer each question fully and accurately. Please print or type.

Date _____

Last Name	First Name	Middle Name
Address	Street	City
		State
		Zip
Primary Phone	Secondary Phone	Email address
Position applied for:		Minimum Salary Requirement:
Date available for employment:		Drivers License #, State of Issue
Are you seeking: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		

Have you ever worked at the Jeffersonville Township Public Library?

☐ YES

☐ NO

If yes, please list dates of employment. _____

Have you ever been convicted of a felony?

☐ YES

☐ NO

Are you at least 16 years old?

☐ YES

☐ NO

Do you have any relatives currently employed by the library?

☐ YES

☐ NO

If yes, Name: _____ Relationship: _____

In case of emergency, notify _____ Phone _____

Tell us briefly why you are interested in working at the Jeffersonville Township Public Library _____

EDUCATION

List any apprenticeships, business, or vocational schools:

Type of School	Name of School	Major Subject	Graduated	Last Year Attended
<u>High School</u>				
<u>College</u>				
<u>Graduate</u>				

LIST ADDITIONAL SKILLS, KNOWLEDGE, OR OTHER RELEVANT QUALIFICATIONS.

PREVIOUS EMPLOYMENT

PLEASE COMPLETE THIS SECTION EVEN IF YOU PLAN TO ATTACH A RESUME. List names and addresses of former employers, beginning with the most recent. Please attach additional pages if necessary.

1. Name and Address of Employer	Dates Employed	Duties Performed
Phone:	MO/YR From: To:	
	Hourly rate/salary: Start: End:	
Job Title: _____ Status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary Supervisor's Name: _____ Reason for leaving: _____		
2. Name and Address of Employer	Dates Employed	Duties Performed
Phone:	MO/YR From: To:	
	Hourly rate/salary: Start: End:	
Job Title: _____ Status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary Supervisor's Name: _____ Reason for leaving: _____		
3. Name and Address of Employer	Dates Employed	Duties Performed
Phone:	MO/YR From: To:	
	Hourly rate/salary: Start: End:	
Job Title: _____ Status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary Supervisor's Name: _____ Reason for leaving: _____		

Please indicate any previous employers you do not want us to contact: _____

May we contact your current employer for a reference and verification? ☐ Yes ☐ No

Are you a United States citizen? Yes _____ No _____

If not, are you authorized to work in the United States, and do you understand that under the Immigration Reform and Control Act of 1986, upon hire, you will be required to provide documents verifying your identity and eligibility to work in the United States? Yes _____

I certify that all of the information submitted on this application is true and complete. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected, and if I am hired, my employment may be terminated at any time.

In consideration of my employment, I agree to comply with the library's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the library's option. I also understand and agree that the library may change, with or without cause and with or without notice, the terms and conditions of my employment at any time.

As an applicant for employment with the Jeffersonville Township Public Library, I understand that a thorough background investigation may be conducted to qualify me for eligibility.

I hereby authorize the custodian of any information related to my previous employment, driving record, education, residence, criminal convictions, credit standing, or character to release said information to the person or agency identified herein unless restricted by law. This authorization is made voluntarily for employment only. I agree to hold harmless any individual or agency involved with the authorized release of legitimate information.

I have read, understand, and consent to these statements by my signature.

Applicant signature: _____

Date: _____

DO NOT WRITE BELOW THIS LINE _____

Interviewed by: _____

Date: _____

Remarks:

Hired: Yes ☐ No ☐ Position: _____

Wage: _____ Start Date: _____