



APPLICATION FOR EMPLOYMENT

Rocky River Public Library • 1600 Hampton Road • Rocky River, Ohio 44116-2699 • 440-333-7610

When filling out this application for employment, it is important that you know:

1. Applications are accepted only for open positions.
2. Applicants for employment with Rocky River Public Library are evaluated and selected on the basis of individual merit and ability with respect to the position being filled. Applicants are selected and hired without discrimination based on race, color, religion, sex, age, national origin, political affiliation, disability or ancestry.
3. Not all job applicants are called for interviews. Only those who follow instructions for filling out the written job applications completely, who meet all the job qualifications, and who are among the best potential candidates for any position are contacted.
4. Once an applicant has accepted an offer of employment, all other applicants are notified that the job has been filled.
5. A detailed work reference check will be undertaken prior to extending a job offer.
6. This employment application does not seek information regarding the applicant's criminal record. However, the Library reserves the right to make inquiry into the applicant's criminal record, to conduct a criminal background check, and to condition any offer of employment on the information obtained from any such inquiry or background check. Additionally, as necessary, a credit reference check and a BMV driving record check may be undertaken. In evaluating an applicant's criminal record, the Library shall make an individualized assessment, utilizing the factors permitted by applicable law.
7. This Application will be active for one (1) year from the date signed. After one (1) year, an applicant must refile for further consideration.

Personal Data

Application Date: _____

This information will be kept confidential

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone: _____

e-mail Address: _____

Are you a Veteran? Yes No Branch of Service _____

ARE YOU LEGALLY PERMITTED TO WORK IN THE UNITED STATES: Yes No

Personal Data

Title of Position desired: _____ Full-Time Part-Time

Where did you find out about this job opening? Sun Newspaper Westlife Newspaper Cleveland.com Facebook Library

Date available to start: _____

Are you available to work Saturday, Sunday and evenings? Yes No

Please list the name and relationship of any current Rocky River Public Library employee you know:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

If you have previously applied for a job with Rocky River Public Library, please list when: _____

If you have ever been employed by Rocky River Public Library please list when: _____

Reason for leaving Rocky River PublicLibrary:

Employment History: List employment in chronological order. Attach additional pages if needed or resume if desired.

Current/Last Employer	Address	Telephone
Position(s) Held		
Dates Employed From: _____ To: _____		Supervisor
Reason for Leaving		

Employer	Address	Telephone
Position(s) Held		
Dates Employed From: _____ To: _____		Supervisor

Reason for Leaving

Employer	Address	Telephone
Position(s) Held		
Dates Employed From: _____ To: _____		Supervisor
Reason for Leaving		

Employer	Address	Telephone
Position(s) Held		
Dates Employed From: _____ To: _____		Supervisor
Reason for Leaving		

If you have you ever been dismissed from or asked to resign from any employment position, please explain:

Educational Data

Name of School	Address	Major Subject/Degree	GPA	Graduate?
High School				
College or University				
Other Schools Attended				

Special courses, licenses, or certifications

List three professional references

Name	Address and Daytime Telephone	Occupation

Certification

I certify that all information contained in this application is true, complete and correct to the best of my knowledge. I understand that any material omission, misrepresentation or falsification of this information is grounds for dismissal from or refusal of employment. I hereby authorize investigation of all statements contained in this application and give permission to contact all or any of my previous employers, references and/or schools for information. I also give my consent to contact the State Motor Vehicle Department for a Moving Vehicle Violation Report if such information is required to perform the duties of the position. I indemnify and hold harmless all persons either providing or receiving information, verbal or written, pursuant to this application.

Applicant's Signature

Date