

# Montgomery County Public Library

*Engaging our community in literacy, self-guided learning, and access to information*

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Apt. #, Street Name & Number City State Zip

Best Contact Phone #: \_\_\_\_\_ Additional Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you 18 years of age or older? Yes \_\_\_\_\_ No \_\_\_\_\_ If under 18, what if your age? \_\_\_\_\_

Are you willing to submit items necessary for a criminal background check? Yes \_\_\_\_\_ No \_\_\_\_\_

If hired, can you provide written evidence you are authorized to work in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_

## EMPLOYMENT HISTORY

Company Name & Address	Work Performed or Job Title	Employment Dates	Rate of Pay	Reason for Leaving

## EDUCATION

School / College	Course of Study	# Years Completed	Diploma / Degree Type

Do you have relatives that are currently employed at the library, or are current library board members?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please specify: \_\_\_\_\_

### SKILLS & ABILITIES

PLEASE TELL US ABOUT ANY SPECIAL SKILLS THAT MAY BE HELPFUL IN THE LIBRARY.

(Examples may include computer & technology skills, experience working with children's programs, genealogy research, customer service work, development of marketing materials, etc.)

### COMMUNITY INVOLVEMENT

PLEASE TELL US ABOUT ANY ORGANIZATIONS YOU HAVE WORKED / VOLUNTEERED WITH, PROFESSIONAL MEMBERSHIPS, SPECIAL LICENSES HELD, HOBBIES, ETC.

### REFERENCES

Name	Organization	Phone Number	Number of Years Acquainted

I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens, all persons hired must submit satisfactory proof of employment authorization and identity. I understand that an offer for employment will be based on a combination of available job openings, job skills or training needed for current job openings, interview and reference information, and status of background check. I understand that the employer will investigate my work and personal history and verify information on this application or related papers. I authorize all individuals, schools, organizations, and previous employers listed herein, to provide information about me, and I release them from all liability in providing this information. This application will be considered active for a period of six months. Completion of an application does not guarantee that there are current job openings, or that you will be interviewed for a position if there is a job opening.

I certify that all the statements herein are true to the best of my knowledge and that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_