



SHAKER HEIGHTS PUBLIC LIBRARY

16500 Van Aken Boulevard Shaker Heights, Ohio 44120

216-991-2030 www.shakerlibrary.org

APPLICATION FOR EMPLOYMENT

READ CAREFULLY – All questions in this application must be answered fully before it will be accepted. All answers must be printed in ink or typewritten. Any willful misrepresentation, omission or falsification of information in this application is sufficient cause for the disqualification of the applicant or the discharge of the employee after hiring. The original application must be submitted, no copies or facsimiles will be accepted.

I. PERSONAL INFORMATION

A.

Name: _____		
Last	First	Middle Int.
Address: _____		
Street		

City	State	Zip Code
Telephone: _____		Are you 16 or over? <input type="checkbox"/> Yes <input type="checkbox"/> No
Email _____		
<i>(Please type or print clearly.)</i>		

B. Are you a United States citizen or do you have the legal right to be employed in the United States?

Yes No

C. Have you ever belonged to the Ohio Public Employees Retirement System of Ohio? Yes No

D. Do you have relatives currently employed by Shaker Heights Public Library or serving on the Board of Trustees? Yes No

If yes, give name(s) and relationship: _____

(Library policy prohibits hiring immediate relatives of employees or trustees.)

II. EMPLOYMENT DESIRED

A. Title of position desired: _____

B. Time Status

Are you applying for: Full-time? Part-time? Substitute?

Normal library scheduling requires public service personnel to work some evenings, some Saturdays and Sunday afternoons at intervals of approximately six weeks. Are there hours or days you would be unable or unwilling to work? Yes No

If yes, please specify: _____

C. Date available: _____ Salary requested: _____

D. Have you ever worked for Shaker Heights Public Library? Yes No

If yes, list dates of employment and position(s) held: _____

E. Have you previously applied for a position at our library? Yes No

If yes, list position(s) applied for and date of application: _____

F. Have you worked under another name(s), please indicate: _____

G. Have you ever been discharged or requested to resign from a position? Yes No

If yes, explain: _____

H. Have you ever worked for another library? Yes No

If yes, give job title and describe typical duties: _____

III. WORK HISTORY – Do not reference your resume.

A. List names of employers in consecutive order with present or last employer listed first. If self-employed, give firm names and supply business reference.

Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Hours per Week:	
Major Duties:			
Name of Supervisor:			
Reason for leaving:			
Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Hours per Week:	
Major Duties:			
Name of Supervisor:			
Reason for leaving:			
Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Hours per Week:	
Major Duties:			
Name of Supervisor:			
Reason for leaving:			

B. May we contact your present employer? Yes No

(Continue on the other side if you choose to list more employers.)

III. WORK HISTORY (continued)

Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Hours per Week:	
Major Duties:			
Name of Supervisor:			
Reason for leaving:			
Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Hours per Week:	
Major Duties:			
Name of Supervisor:			
Reason for leaving:			
Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Hours per Week:	
Major Duties:			
Name of Supervisor:			
Reason for leaving:			

IV. EDUCATION AND TRAINING

High School:			
Address:			
Number of Years:	Diploma?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Trade or Vocational School:			
Address:			
Major:	Degree or Certification?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
College:			
Address:			
Major:	Number of Years:	Degree:	Date:
Graduate Education:			
Address:			
Major:	Number of Years:	Degree:	Date:

A. Other education, training, experience, or special skills: _____

B. Computer familiarity (Describe): _____

V. REFERENCES – List three references who are not relatives or former employers:

Name:		Occupation:	
Address:			
City:	Zip Code:	Telephone:	
Name:		Occupation:	
Address:			
City:	Zip Code:	Telephone:	
Name:		Occupation:	
Address:			
City:	Zip Code:	Telephone:	

VI. DECLARATION OF APPLICANT

(Read the following paragraphs carefully before signing. This Declaration of Applicant must be signed and dated in ink by the applicant.)

My signature below authorizes Shaker Heights Public Library to contact any agency, company, or individual it deems appropriate to investigate my employment history, character and qualifications, and authorizes release of information in connection with my application for employment. This investigation may include, but not be limited to, such information as criminal or civil convictions, driving records, previous employers and educational sources. I waive my right of access to any such information, and without limitation hereby release Shaker Heights Public Library and the reference source from any liability in connection with its release or use.

Furthermore, I hereby affirm that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements, answers to questions, and any attachments hereto. I am aware that should an investigation disclose any misrepresentation, omission, or falsification, I may be disqualified, or if I have already been hired, my employment may be terminated. In the event that I am employed by Shaker Heights Public Library, I agree to comply with all of its orders, rules and regulations. I understand that employment with Shaker Heights Public Library automatically includes membership in the OPERS (Ohio Public Employees Retirement System) as provided under the Ohio Revised Code. I understand that no one in the Library is authorized to enter into any written or verbal employment contracts with me without the consent of the Director. I also understand that my employment is “at-will” and may be terminated by myself or by the Library at any time for any reason, with or without prior notice.

Date

Signature of Applicant

THANK YOU FOR APPLYING FOR EMPLOYMENT WITH THE SHAKER HEIGHTS PUBLIC LIBRARY

The Shaker Heights Public Library does not discriminate on the basis of race, color, national origin, age, religion, height, weight, disability, marital status, sex, sexual orientation, political affiliation, or veteran status in accordance with applicable state or federal law in employment. No person shall be denied employment solely because of any impairment, which is unrelated to the ability to engage in activities involved in the position for which application has been made.