

200 Main Street Dansville, NY 14437 585-335-6720 | Fax: 585-335-6133 dansvillelibrary.org

Where knowledge grows

Employment Application

dansvillelibrarydirector@owwl.org

Name:				Today's Date:	:	
	Last	First	M.I.	_		
Current Address:	Church		Cit.		Chaha	7:
	Street		City		State	Zip
Phone:			☐ Cell	\square Home	\square Othe	r
Email Address (O	ptional):					
Position for whic	h you are appl	ying:				
• Are you legally (Proof of citizenship				☐ Yes	□ No	
• Are you at least	: 18 years of ag	e? 🗆 Yes	□ No If N	o, provide currer	nt age:	
 Are you able to bend, with or w 				☐ Yes	□ No	
Availability (Chec	k all that apply):	☐ Days	Evenir	ngs		
☐ Monday [Tuesday	☐ Wednesday	/ Thursday	☐ Friday	☐ Saturd	ay
Education						
High Shool:				□ Y	′es 🗌 No	
	Name	9	Location	Gr	aduated?	
Other:						
	Name	9	Location	l	Degree Received	j
Other:						
	Name	9	Location	l	Degree Received	1
What is your com	nputer skill leve	el? 🗌 Profici	ent 🗌 Int	termediate	☐ Basic	
List programs/softv	vare/application	s you are familia	ar with:			

Work Experience (Current/most recent first) Employer's Name: ____ Employer's Phone: Employer's Address: Job Title: Start Date: End Date: Reason for Leaving: ____ Name of Supervisor: _____ May we contact? \square Yes □ No Brief description of your job duties: Employer's Name: Employer's Phone: Employer's Address: Job Title: Start Date: _____ End Date: _____ Reason for Leaving: Brief description of your job duties: Employer's Name: ____ Employer's Phone: Employer's Address: Job Title: Start Date: End Date: Reason for Leaving: Name of Supervisor: _____ May we contact? \square Yes □ No Brief description of your job duties:

Other skills, qualifications, or credentials relevant to the position for which you are applying:							
References (Please provide at least 3 references)							
1							
	Name	Phone	Email				
2.							
	Name	Phone	Email				
3							
	Name	Phone	Email				
Please	Please read carefully before signing						
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I certify that the information given in this application (including any attachments) is true and complete. In the event of employment, I understand that any false or misleading information given on the application							
or in the interview may result in discharge.							
o and many result in district ger							
I understand and agree that all information furnished in this application may be verified by the Dansville							
Public Library. I hereby release employers, schools, organizations or individuals named or referred to							
above from liability in responding to inquiries in connection with my application.							
In consideration of my employment, I agree to comply with the policies, rules, regulations, and							
procedures of the Dansville Public Library. I further understand and acknowledge that this is an							
application for employment, that no employment contract is being offered.							
C:	af A		Data				
Signat	ure of Applicant:		Date:				