APPLICATION FOR EMPLOYMENT

PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

				DATE
Name				
La	ast	First	Middle	Maiden
Present address				
	Number	Street	City State Zi	p
How long		4	Social Security No	-
Telephone ()	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE			
If under 18, please list age	e			
			Days/hours availab	ale to work
Position applied for How many hours can you work weekly?		No Pref		
		Mon		
			Tue	
Can you work evenings & weekends? ☐ Yes ☐ No		Wed		
Employment desired	□ FULL-TIME O	NLY		and the second s
	PART-TIME	ONLY		
	☐ FULL- OR PA	RT-TIME		
When available for	work?			
Do you smoke?			☐ Yes ☐ No	
Are you U. S. Citize	2		DV 5.11	
Are you o. S. Ollize	iii f		☐ Yes ☐ No	
Have you preciously	y applied for emplo	yment at the Library?	Yes No	
Have you previously	v been employed b	y the Library?	☐ Yes ☐ No	
			= 103 = 140	
Does the Library en			☐ Yes ☐ No	
		oyment physical exam	1	
and background che			☐ Yes ☐ No	
Do you have any co	mmitments to anot	her employer		
Which might affect you employment with the Library		☐ Yes ☐ No		
Have you ever beer	n convicted of crim	e?	☐ Yes ☐ No	
If yes, explain on a	separate sheet the f	ollowing information:		
The number of o	conviction(s)			
	e(s) leading to convid			
How recently su	ich offenses was/were	committed		
Sentence(s) imp				
Types of rehabili	itation.			

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High School	Location	Graduated? ☐ Yes ☐ No			
College/University	Location	Major & Degree			
College/University	Location	Major & Degree			
College/University	Location	Major & Degree			
College/University	Location	Major & Degree			
Other	Location	Major & Degree			
Military					
HAVE YOU EVER BEEN IN THE A	RMED FORCES?				
Specialty	Date Entered	Discharge Date			
Do you have a driver's license?	☐ Yes ☐ No				
Driver's license number	State of issue Expiratio	on date			
Have you had any accidents during	the past three years?	How many?			
Have you had any moving violations	s during the past three years? Yes No	How many?			

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Work Experience Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets may be included if necessary.

Employer (Address, City, State, Zip, Phone Number)	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		То	Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learner company.		omotions while you wo	rked at this
May we contact your present employer? ☐ Yes ☐ No			
Employer (Address, City, State, Zip, Phone Number)	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		То	Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned company.	ed, advancements or pr	romotions while you wo	orked at this
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		From	Start	
		То	Final	
	Your last job title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or learned	ed, advancements or pr	omotions while you wo	rked at this	
company.	A			

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by the Macon County Tuskegee Public Library (hereinafter called "the Library"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Library practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Library's Director. Both the undersigned and Macon County Tuskegee Public Library may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Library may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Library permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Library from any liability as a result of such contract.

I also understand that the Library has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; consent to and compliance with such policy is a condition of my employment; and continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Library may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Library will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Library shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Library is terminable at will for any reason by either party.

Signature of applicant	Date:	