

EMPLOYMENT APPLICATION
An Equal Opportunity Employer
Marshall-Lyon County Library



MARSHALL-LYON COUNTY LIBRARY

To be considered an applicant you must complete this form. A resume may also be attached - see job announcement for applications requirements. Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for your signature. This application is to fill the current open positions(s) only.

PERSONAL INFORMATION						
Last Name:		First:		M.I.	Date:	
Street Address:				Apartment/Unit #		
City:		State:			ZIP	
Phone	Home:		Cell:			
Email Address:						
POSITION APPLYING FOR						
Job Title:						
Are you applying for:	FT <input type="checkbox"/>	PT <input type="checkbox"/>	What shifts are you available to work?	Days <input type="checkbox"/>	Nights <input type="checkbox"/>	Weekends <input type="checkbox"/>
Available Start Date:						
Are you legally eligible to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> <small>(Federal Law requires proof of identity and employment authorization for all new employees.)</small>						
Are you at least 16 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/> Do you have a valid driver's license? Yes <input type="checkbox"/> No <input type="checkbox"/>						
EDUCATION/TRAINING						
<u>School</u>	<u>Name</u>	<u>Location</u>	<u>Dates Attended From/To</u>	<u>Diploma, Degree & Major</u>	<u>Graduated</u>	
High School						
College						
Other (Business, Vocational, Military)						

EMPLOYMENT HISTORY – STARTING WITH MOST RECENT. USE ADDITIONAL PAPER IF NECESSARY.

Employer:			
Address:			
Street	City	State	Zip
Telephone:		Supervisor Name:	
Dates From:	To:	Final Rate of Pay:	
Position Held:			
Primary Duties			
Reason for Leaving:			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

NEXT EMPLOYER:

Employer:			
Address:			
Street	City	State	Zip
Telephone:		Supervisor Name:	
Dates From:	To:	Final Rate of Pay:	
Position Held:			
Primary Duties			
Reason for Leaving:			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

NEXT EMPLOYER:

Employer:			
Address:			
Street	City	State	Zip
Telephone:		Supervisor Name:	
Dates From:	To:	Final Rate of Pay:	
Position Held:			
Primary Duties			
Reason for Leaving:			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

TECHNOLOGY SKILLS (List All Skills & Software Application You Have Experience Using):

Word Processing:

Spreadsheet:

Other Software:

Database:

Scanner? Yes No Copier? Yes No Digital Phone Systems? Yes No E Readers, Mobile Devices (smart phones, tables)? Yes No

Explain Internet Skills, Including Email Usage:

Professional Licenses or Certificates Held:

MILITARY**PERSONAL REFERENCE (PLEASE LIST THE NAMES OF THREE (3) PERSON NOT RELATED TO YOU BY BLOOD OR MARRIAGE.)**

Last Name:

First:

M.I.

Address:

*Street**City**State**Zip*

Telephone: Home:

Other:

Connection to You (i.e. friend, co-worker):

Occupation

PERSONAL REFERENCE

Last Name:

First:

M.I.

Address:

*Street**City**State**Zip*

Telephone: Home:

Other:

Connection to You (i.e. friend, co-worker):

Occupation

PERSONAL REFERENCE

Last Name:

First:

M.I.

Address:

*Street**City**State**Zip*

Telephone: Home:

Other:

Connection to You (i.e. friend, co-worker):

Occupation

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. In evaluating an applicant's criminal record, the Library shall make an individualized assessment, utilizing the factors permitted by applicable law.

Are you related by blood or marriage to any person now employed by the Marshall-Lyon County Library?

Yes No

If yes, give name and relationship to you.

CERTIFICATION

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should an investigation disclose untruthful or misleading answers, my application may be rejected, my name removed from consideration, or my employment may be terminated.

I authorize the City of Marshall/Marshall-Lyon County Library to investigate my references, work record, education, and other matters related to my suitability for employment and further authorize the references that I have listed to disclose to the City/Library information related to my job skills, knowledge, and abilities. I hereby release from liability the City of Marshall/Marshall-Lyon County Library and their representatives in seeking such information and all other persons, corporations or organizations for furnishing such information.

Of hired, I understand and acknowledge that I may be required to submit a criminal history check, physical examination, and/or other background checks relevant for the position for which I have applied and when will be listed on a release form that will be attached to the offer of employment.

I understand it is the City's/Library's policy not to refuse to hire a qualified individual because of this person's need for accommodation that would be required by the Americans with Disabilities Act.

I understand and agree that, if hired, my employment is for no definite period and either City of Marshall/Marshall-Lyon County Library or I may termination our relationship at any time, and that this employment application does not constitute an employment contract.

Signature of Applicant: _____ Date: _____

IT IS THE POLICY OF City of Marshall and the Marshall-Lyon County Library to provide equal opportunity in all terms, conditions and privileges of employment for all qualified job applicants and employees without regard to race, color, national origin, gender or age (Unless a bona fide job requirement) or the presence of any disability. Those applicants requiring accommodation to the application and/or interview process should contact the Library Director.

DATA PRACTICES ADVISORY

The information requested on the application is necessary, either to identify you or to assist in determining your suitability for the position for which you are applying. You may legally refuse, but refusal to supply the requested information will mean that your application for employment may not be considered.

Information requested on your application that is defined by State Statute as public may be released on request and includes job history, education and training, rank on our eligibility list, relevant test scores, veteran's status, and work availability.

Your name is private except when you are certified as eligible for appointment to a vacancy or selected as a finalist for the position. Certain other information requested on your application is private and may be released only to you or to governmental entities authorized access by law (MS 13.02, Subd. 12). Private data contained above:

NAME: Used to identify you in relation to other applicants.

LOCAL/PERMANENT ADDRESS/PHONE NUMBERS: Used to contact you regarding your application's status. You are not legally required to provide this information. Failure to provide this information may result in a delay in processing or notifying you of your application's status.

LICENSE INFORMATION: Used to certify applicants for position where State law requires appropriate license. You are legally required to provide this information. Failure to provide this information may result in your rejection as an applicant for these positions.

AGE RANGE: Use to accurately certify applicants for certain types of work according to State law. You are legally required to provide this information. Failure to provide this information may result in rejection of your application.

NOTICE TO MINORS: Minors from whom private data or confidential data is collected have the right to request that parental access to the private data be denied.

CITIZENSHIP STATUS: Used to certify applicants for work in the United States as determined by laws of the United States Department of Labor and the State of Minnesota. Failure to provide this information may result in rejection of your application.

EMPLOYMENT: If you are selected for employment with the Library, the following additional information about you will be public: your name, actual gross salary and salary range; contract fees; actual gross pension; the value and nature of your fringe benefits; the basis for and the amount of any added remuneration, such as expenses or mileage reimbursement, in addition to your salary; your job title; job description; bargaining unit (if applicable); the dates of your first and last employment with the Library; the status of any written complaints or charges against you while at work, regardless of whether or not they have resulted in disciplinary action; the final disposition of any disciplinary action taken against you, specific reasons for it, and all supporting documentation about your case; terms of any agreement settling administrative or judicial proceedings; your work location and work telephone number; your employee identification/badge number; honors/awards received; your education/training background and previous work experience; your work-related continuing education; and payroll time sheets. Information not listed as public, which is maintained as part of your personnel record, is private, and will not be shared with anyone but those members of our staff and appointing authorities whose work assignment requires access, those persons authorized by law to have access, and those persons to whom you have given your informed written consent. Examples, but not an exclusive listing, of those authorized by law to have access to personnel data include labor organizations to the extent they need it in the conduct of normal business as your representative, insurance providers, Library contractors whose contracts require access (e.g., the City Attorney or insurance claims adjuster), Public Employees Retirement Association, Internal Revenue Service, Social Security Administration, State Department of Employment and Security and any other entity authorized by law. Personnel data will be disclosed as required by a court order or for the purposes of wage attachments, and as may be required by any State or Federal law subsequently enacted.

This information is subject to change consistent with subsequent amendments to the MN Government Data Practices Act. For further information, refer to MN Statutes Ch. 13.