



**CUYAHOGA FALLS LIBRARY**

2015 Third Street, Cuyahoga Falls, OH 44221

-----APPLICATION FOR EMPLOYMENT-----

Date of Application \_\_\_\_\_

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

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

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Do you want full time? \_\_\_\_\_ Part time? \_\_\_\_\_

What hours can you work? \_\_\_\_\_ Evenings? \_\_\_\_\_ Weekends? \_\_\_\_\_

Are you able to perform the job function of the position for which you are applying with or without reasonable accommodation? YES \_\_\_\_\_ NO \_\_\_\_\_

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RECORD OF EDUCATION

School	Name of School	Major/Minor	Number of Years Completed	Year Graduated	List Diploma or Degree
High	_____	_____	1 2 3 4	_____	_____
College	_____	_____	1 2 3 4	_____	_____
Other (Specify)	_____	_____	1 2 3 4	_____	_____
Library School	_____	_____	_____	_____	_____

Any plans for future study? \_\_\_\_\_

Special experiences, qualifications, skills: Typing \_\_\_\_\_ WPM \_\_\_\_\_; Computer \_\_\_\_\_;

Other (list) \_\_\_\_\_

What are your special interests; \_\_\_\_\_

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT

<u>Dates</u>	<u>Name and Address of Employer</u>	<u>Salary</u>	<u>Position</u>	<u>Reason for Leaving</u>
1. From _____ To _____	_____ _____ Supervisor _____	_____ _____ Phone _____	_____ _____ _____	_____ _____ _____
2. From _____ To _____	_____ _____ Supervisor _____	_____ _____ Phone _____	_____ _____ _____	_____ _____ _____
3. From _____ To _____	_____ _____ Supervisor _____	_____ _____ Phone _____	_____ _____ _____	_____ _____ _____

May we contact the employers listed above? \_\_\_\_\_ If not, indicate by No. which one (s) you do not wish us to contact \_\_\_\_\_

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PERSONAL REFERENCES (Not Former Employers or Relatives)

<u>Name and Occupation</u>	<u>Address</u>	<u>Phone Number</u>
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

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I authorize investigation of all statements in this application. Misrepresentation or omission of facts called for is cause for dismissal. I understand that the Cuyahoga Falls Library has the right to conduct a background check in connection with this application.

Date \_\_\_\_\_ Signature \_\_\_\_\_

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Do not write below this line

For office use only

Interviewed by: \_\_\_\_\_

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