



525 N. Walnut St.  
Dover, OH 44622  
330-343-6123

[www.doverlibrary.org](http://www.doverlibrary.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.

### I. PERSONAL INFORMATION

A.

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

Address: \_\_\_\_\_  
Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Email: \_\_\_\_\_

B. Are you a citizen of the United States or do you have the legal right to be employed in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

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

D. Do you have relatives currently on the Board of Trustees or among the employees of the Dover Public Library? Yes \_\_\_\_ No \_\_\_\_

If yes, give name(s) and relationship: \_\_\_\_\_  
(Library policy prohibits hiring immediate relatives of employees or trustees.)

E. Previous addresses and dates of residence:

## II. EMPLOYMENT DESIRED

A. Position title for which you are applying: \_\_\_\_\_

B. TYPE OF WORK: **(Please check all types of work in which you are interested)**

PUBLIC SERVICE:

Adult Dept. \_\_\_\_ Children's Room \_\_\_\_ Technology Room \_\_\_\_

Audi/Visual Room \_\_\_\_\_

SUPPORT SERVICE:

Administration \_\_\_\_ Custodial \_\_\_\_ Security \_\_\_\_ Page \_\_\_\_ Technical Services \_\_\_\_

C. HOURS OF WORK: **(Please check all that apply)**

Full time \_\_\_\_

Part time \_\_\_\_

D. Normal library scheduling requires employees to work some evenings, and some Saturdays. Are there hours or days you would be unable or unwilling to work?

Yes \_\_\_\_ No \_\_\_\_

If yes, please specify:

E. Date available to begin work:

F. Have you ever worked for the Dover Public Library before?

Yes \_\_\_\_ No \_\_\_\_

If yes, list when, where, and position(s) held:

G. If you worked under another name(s), please list that name:

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

If "yes," please explain:

I. Have you ever worked in a library? Yes \_\_\_\_ No \_\_\_\_  
If Yes, give job title and describe typical duties:

**III. EDUCATION AND TRAINING:**

A.

HIGH SCHOOL:
Address:
Diploma? Yes ___ No ___ Date:
TRADE or VOCATIONAL SCHOOL:
Address:
Degree or Certification? Yes ___ No ___ Date:
COLLEGE:
Address:
Degree or Certification? Yes ___ No ___ Date:
GRADUATE EDUCATION:
Address:
Degree or Certification? Yes ___ No ___ Date:

B. Other education, training, experience, or special skills that would be useful:

C. What computer software programs can you use?

D. Name the best book or books you have read in the last six months.

**IV. WORK HISTORY (Please complete even if submitting a resume.)**

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

Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Major Duties:	
Name of Supervisor:		Telephone:	
Email Address:			
Reason for Leaving:			

Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Major Duties:	
Name of Supervisor:		Telephone:	
Email Address:			
Reason for Leaving:			

Date of Employment	From:	To:	Ending Salary Rate:
Place of Employment:			
Address:			
Job Title:		Major Duties	
Name of Supervisor:		Telephone:	
Email Address:			
Reason for Leaving:			

B. May we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

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**

My signature below authorizes the Dover 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 conviction, driving records, previous employers and educational sources.

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 the Dover Public Library I agree to comply with all of its orders, rules, and regulations and understand that employment with the Dover Public Library automatically includes membership in the P.E.R.S. (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 understand that my employment is "at-will" and may be terminated by myself or by the library at any time for any reason at all, with or without prior notice.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

The Dover 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.