



**121 Fair Avenue NW  
New Philadelphia, OH 44663  
330-364-4474  
[www.tusclibrary.org](http://www.tusclibrary.org)**

## **APPLICATION FOR EMPLOYMENT**

***Please read carefully*** – All questions on 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 on this application is sufficient cause for disqualification of the applicant or the discharge of employee after hiring.

### **I. PERSONAL INFORMATION**

Name: \_\_\_\_\_

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

City/State: \_\_\_\_\_ ZIP \_\_\_\_\_

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

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

A. Are you a citizen of the United States or do you have a legal right to be employed in the United States?

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

B. Have you ever belonged to the Public Employees Retirement System of Ohio?

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

C. Do you have relatives currently on the board of Trustees or among the employees of the Tuscarawas County Public Library system?

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

If yes, give names(s) and relationship:

*(Library policy prohibits hiring immediate relatives of employees or trustees.)*

D. How long have you lived at your present address? \_\_\_\_\_

## II. EMPLOYEMENT 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 Reference Department \_\_\_\_\_  
Children's Department \_\_\_\_\_  
Circulation Department \_\_\_\_\_  
Branch Library \_\_\_\_\_

Support Service:

Administrative \_\_\_\_\_  
Custodial \_\_\_\_\_  
Page \_\_\_\_\_  
Security \_\_\_\_\_  
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 Tuscarawas County Public Library system before?

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

If yes, please 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 asked to resign from a position?

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

If yes, please explain:

I. Have you ever worked in a library?

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

If yes, please give job description and describe typical duties:

### III. EDUCATION AND TRAINING

A. High School:

1. School Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Diploma received? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_

B. Trade or Vocational School:

1. School Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Degree/Certification? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_  
Degree Type: \_\_\_\_\_
2. School Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Degree/Certification? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_  
Degree Type: \_\_\_\_\_

C. College:

1. School Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Degree/Certification? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_  
Degree Type: \_\_\_\_\_
2. School Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Degree/Certification? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_  
Degree Type: \_\_\_\_\_

D. Graduate Education:

1. School Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Degree/Certification? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_  
Degree Type: \_\_\_\_\_

E. Other education, training, experience, or special skills that would be useful?

F. What computer software programs can you use?

**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.

1. From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Place: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Major Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

2. From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Place: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Major Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

3. From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_  
Place: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Major Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

B. If self-employed, give firm name and supply two (2) business references.

Firm Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Business Reference: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Business Reference: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

C. May we contact your current employer?  
Yes \_\_\_\_\_ No \_\_\_\_\_

D. How did you learn about this employment opportunity?

**V. REFERENCES**

A. Please list 3 references who **are not** relatives or former employers.

1.	Name:	_____
	Address:	_____
	City/State:	_____ Zip: _____
	Telephone:	_____ Email: _____
	Occupation:	_____
2.	Name:	_____
	Address:	_____
	City/State:	_____ Zip: _____
	Telephone:	_____ Email: _____
	Occupation:	_____
3.	Name:	_____
	Address:	_____
	City/State:	_____ Zip: _____
	Telephone:	_____ Email: _____
	Occupation:	_____

**IV. DECLARATION OF APPLICANT**

***Please read carefully***-This Declaration of Applicant **must be signed and dated in ink** by the applicant. Please read the following paragraphs carefully before signing.

My signature below authorizes the Tuscarawas County 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 Tuscarawas County Public Library, I agree to comply with all of its orders, rules, and regulations and understand that employment with the Tuscarawas County Public Library automatically includes membership in the O.P.E.R.S. (Ohio Public Employees Retirement Systems) as provided under the Ohio Revised Code. 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.

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

\_\_\_\_\_  
Date

The Tuscarawas County Public Library does not discriminate on the basis of race, color, national origin, age, religion, height, weight, disability, martial status, sex, sexual orientation, political affiliation, or veteran status in accordance with applicable state or federal employment laws. No person shall be denied employment solely because of any impairment that is unrelated to the ability to engage in activities involved in the position for which application has been made.