

EMPLOYMENT APPLICATION

610 Woodmere Ave. Traverse City, MI 49686 231-932-8500 jobs@tadl.org 231-932-8549

TRAVERSE AREA DISTRICT LIBRARY IS AN EQUAL OPPORTUNITY EMPLOYER. APPLICANTS WILL BE CONSIDERED WITHOUT UNLAWFUL DISCRIMINATION BASED ON RACE, COLOR, RELIGION, AGE, SEX, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION, PREGNANCY, NATIONAL ORIGIN, DISABILITY, GENETIC INFORMATION, HEIGHT, WEIGHT, MARITAL STATUS AND VETERAN STATUS. TRAVERSE AREA DISTRICT LIBRARY IS AN AT WILL EMPLOYER.

Date of Application				
Position (s) for which you are applying: _	Profession	al: Librarian		
-	Para-profe	essional: Library Aide	or Library Assistant	
_	Page	Technology Dept	Substitute	Other
Referral Source: Advertisement E	Employment A	agency TADL Em	ployee Other	
PLEASE PRINT:				
Name	Preferred Name			
Address				
City, State, Zip				
Phone				
Are you 18 years or older? Yes N	0			
Have you ever been employed here before	e?Yes	No		
Are you prevented from lawfully becoming	g employed ir	the United States?	Yes No	
Are you available to work Full-time	Part-time	e Substitute/Irre	egular Hours	
Which shifts can you work? Morning	s Afterno	oons Evenings/N	lights Weekends	
Are you on lay-off and subject to recall?	Yes 1	No		
Please list any relatives or friends who wo	rk here and tl	neir relationship to y	ou.	
Name		Relationship		
Name		Relationship		

Employment Experience

List each job held, beginning with your present or most recent job. Include military service assignments and volunteer activities (exclude groups which indicate race, color, religion, sex, national origin, age or any other protected classifications).

Employer		Phone
Address		
Dates Worked	Reason for Leaving_	
Job Title	Supervisor	
Work Performed		
Employer		Phone
Address		
	Reason for Leaving_	
Job Title	Supervisor	
Work Performed		
Employer		Phone
Dates Worked	Reason for Leaving_	
Job Title	Supervisor	
Work Performed		

^{*}Use the back of the sheet, or add an additional page, for additional employment listing.

Summarize any special skills and qualifications acquired from your previous employment or other experience.				
Education				
High School Attended				
Highest year completed 9 10 11 12				
Diploma / Degree No Yes (list)				
College/University Attended				
Highest year completed 1 2 3 4				
Diploma / Degree NoYes (list) Year:				
Graduate/Professional Institution				
Highest year completed 1 2 3 4				
Diploma / Degree No Yes (list) Year:				
Describe any specialized training, apprenticeships, certifications or honors received.				
State any additional information you feel may be helpful to us in considering your application.				
· 				

1. Name Email Address Phone 2. Name Email Address Phone 3. Name Email Address Phone 3. Name Email Address Phone Potential Employee's Certification I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that falsified statements or omissions from this application shall be grounds for rejection of this application, or if hired, for dismissal. I authorize Traverse Area District Library to investigate all statements contained in thi application, including records of former employers, police departments, and other references o sources concerning me. I authorize all such references and sources to release this information without liability for damage resulting from such release. I waive any written notice of the release of such records that may be required by state or federal law. I understand that I may be subject to a criminal background check and/or a drug screen as par of a conditional offer of employment. If hired as an employee, I understand I will be employed at will, that my employment will be fon definite period of time, and that my employment may be terminated by me or my employe at any time, for any reason, with or without notice. I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS IN THE POTENTIAL EMPLOYEE'S CERTIFICATION SECTION OF THIS APPLICATION: Signature of Applicant Date (for office use only) Recommended for hire by Date Approved for hire by Date	Give name, email address ar	nd phone number of three references not	related to you.
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Recommended for hire by Date	Signature of Applicant		Date
		(for office use only)	·····
Approved for hire by Date	Recommended for hire by	·	Date
	Approved for hire by		Date

Department _____ Start Date _____