

THE NYACK LIBRARY APPLICATION FOR EMPLOYMENT

Date _____

How were you referred to us? _____

We are an **equal opportunity employer** and do not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, gender, marital status, national origin, disability or handicap, sexual orientation or veteran status or any other protected characteristic. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons.

NAME _____

EMAIL _____

ADDRESS _____

PHONE # _____

CITY / STATE / ZIP _____

POSITION APPLYING FOR:	HOURS AVAIL: Thurs _____ Mon _____ Fri _____ Tues _____ Sat _____ Weds _____ Sun _____	DATE AVAILABLE TO START WORK _____
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If less than 18 years old, can you supply working papers? YES NO If under 18, Date of Birth: _____Have you been previously employed by **THE NYACK LIBRARY**? _____ If so, when? _____

	Name/Address of School	Degree
High School		
College		
Other		

Other Qualifications:

Summarize special job-related skills, certificates, computer, language or customer service skills and/or any other qualifications acquired from employment or other experience you wish to be considered in your application.

Military Service:

Describe any job-related training received in the United States military.

Can you submit proof of legal employment authorization and/or identity? YES NO*(If offered employment, you will be required to provide documentation to verify eligibility within 3 days of hire. We use E-verify)*Have you been convicted of a felony? YES NO

If yes, please explain (a conviction will not automatically bar employment): _____

EMPLOYMENT HISTORY: List below Last Four Employers, Starting With Present/Last One First

Date Month/Year	Name and Address of Employer	Phone	Position	Wage/ Salary	Reason for Leaving

May we contact your present employer? YES NO

Whom should we speak to? _____

PROFESSIONAL REFERENCES: Give Below the Names of Three Persons Not Related To You, Whom You Have Known At Least One Year.

Name	Email Address	Business	Phone
1			
2			
3			

PLEASE ATTACH YOUR RESUME

APPLICANT CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize **The Nyack Library** to contact, obtain, and verify the accuracy of information contained in this application and to obtain reference information on my work performance. I also hereby release from liability **The Nyack Library** and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. I further understand that neither policies, rules and regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

APPLICANT SIGNATURE _____

DATE _____