

APPLICATION FOR EMPLOYMENT

Clinton-Macomb Public Library
40900 Romeo Plank Road
Clinton Township, MI 48038

AN EQUAL OPPORTUNITY EMPLOYER

INSTRUCTIONS: Please print the requested information in the spaces provided below.

Date of Application: _____ Date available to begin work: _____

PERSONAL INFORMATION

Last Name	First	Middle	Social Security Number
Other Last Name	Other First	Other Middle	Driver's License Number
Street Address			Home Telephone () -
City, State, Zip			Other Telephone (please specify) () -
Are you legally eligible for employment in the U.S.? [*]		Are you 18 years or older?	
If related to anyone in our employ, state name and relationship to you. _____			
Have you ever been convicted of a crime? A criminal conviction record will not necessarily prohibit you from being employed. If YES, please list date, place and nature of offense. _____			<input type="checkbox"/> YES (explain) <input type="checkbox"/> NO
Are there any felony charges presently pending against you? _____			<input type="checkbox"/> YES (explain) <input type="checkbox"/> NO
Can you perform the essential duties of the job in which you wish to be employed, with or without accommodation?			

^{*} The Clinton-Macomb Public Library conforms to the Immigration Reform and Control Act of 1986 which requires you to furnish documentation showing your identity and legal authorization to work in the United States once you have been offered employment.

EMPLOYMENT DESIRED

POSITION(S) APPLIED FOR:	PAY/SALARY DESIRED:
_____	_____
Will you accept part-time work? _____	
Have you ever worked for another organization similar to the Clinton-Macomb Public Library? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If YES, Position: _____	
Reason for Leaving: _____	

Do you have any special training skills, qualifications, licenses, certifications or other experiences that relate to the position(s) applied for?

EDUCATION

EDUCATION	Name and Location of School	No. of Years Completed	Subjects Studied	Degrees Earned	G.P.A.
High School					
College/ University					
Vocational/ Trade/Graduate School					

PHYSICAL RECORD

In case of emergency, notify:

Name

Address

Telephone Number

Medical Examination. In accordance with applicable legal requirements, the Clinton-Macomb Public Library may require job applicants to undergo a medical examination after an offer of employment has been made and prior to the commencement of employment duties, and may condition the offer of employment on the results of such examination.

I HEREBY CERTIFY THAT I AM NOT CURRENTLY ENGAGED IN THE ILLEGAL USE OF DRUGS. I understand that as a condition of employment, I may be required to take a pre-employment drug test for the illegal use of drugs which may include the collection of urine samples from my person, or the use of other testing methods. I agree that the results of this test may be submitted to the Clinton-Macomb Public Library or its authorized representative, and I expressly release the collection agency and the testing laboratory from any and all liability for performing the requested test, and for communicating the results to the Library. I understand that if the results of any pre-employment drug test are positive, it will be cause for rejection of my application or, if I am hired, that my employment with the Library may be immediately terminated.

Applicant's Signature _____

EMPLOYMENT INFORMATION

Have you ever been discharged or requested to resign any job?

YES

NO

If YES, please explain circumstances

Are you presently employed?

YES

NO

REFERENCES

Please give the names of 3 persons, not related to you, whom you have known for over a year.

NAME	ADDRESS	TELEPHONE	BUSINESS	YEARS KNOWN

- I authorize the Library to use any information in its possession concerning me for any purpose it deems appropriate, including disclosure of information to any third party, future employer or prospective future employer without notification to me of such disclosure, and I release the Library from any liability in connection with such use or disclosure.
- If I am hired by the Library, I understand and agree that I will be bound by the rules, regulations, policies, procedures, and other terms and conditions of employment of the Library, as they are from time-to-time changed, with or without notice.
- If I am hired by the Library, I understand that I have the right to terminate my employment at any time and for any reason, with or without notice. I further understand that the Library can terminate the employment relationship at any time for any lawful reason, with or without cause, with or without notice. This at-will employment relationship exists regardless of any other written statements or policies or any other Library document or any verbal statements to the contrary. No one except the Library's director can enter into any kind of employment relationship or agreement which is contrary to the above. To be enforceable, any employment relationship or agreement which is contrary to the above must be in writing and personally signed by the Library's director and myself.
- I agree not to file any action or claim relating to my application for or employment with the Clinton-Macomb Public Library more than six (6) months after the date of the challenged action, and **to waive any longer statute of limitations period.**

Applicant's Signature _____ Date _____

Please return completed application to: Clinton-Macomb Public Library
Attention: Accounting/Benefits Coordinator
40900 Romeo Plank Road
Clinton Township, MI 48038

Approved: May 21, 2008