

Job Application

Delton District Library

330 N. Grove St.

Delton MI 49046

Delton District Library is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law.

Applicant Name: _____

Address: _____

City, State, Zip Code: _____

Telephone Number and Email Address: _____

Date of Application: _____

Position Applying for: _____

What days are you available to work? _____

What hours are you available to work? _____

On what date can you start working? _____

Are you 18 years of age, or older? Yes No

Are you a US citizen or approved to work in the United States? Yes No

What document can you provide as proof of citizenship or legal status? _____

Do you have any conditions that would require job accommodations? Yes No

If yes, describe required accommodations _____

(Delton District Library is ADA compliant and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential tasks, relative to their job.)

Have you been convicted of a criminal offense (felony or misdemeanor?) Yes No

If yes, describe nature of the crime(s), when and where convicted and the disposition of the case: _____

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. All events surrounding the offense, and the relevance of the offense to the position applied for, may, however be considered.)

List skills and qualifications for desired position _____

Education

High School Name: _____ Location: _____ Year graduated _____

Or do you have a GED? Yes NO Program location _____ Year completed _____

College: _____ Location: _____ Year Graduated _____

Degree obtained: _____

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Degree obtained: _____

Please list previous employment:

Employer name: _____

Job Title: _____

Employer Address: _____

Employer phone number: _____

Dates employed: _____

Reason for leaving: _____

Employer name: _____

Job Title: _____

Employer Address: _____

Employer phone number: _____

Dates employed: _____

Reason for leaving: _____

Please provide 2 personal or professional references below:

Name _____ Contact information _____

Name _____ Contact information _____

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____

Date: _____