

APPLICATION FOR EMPLOYMENT  
OAK HARBOR PUBLIC LIBRARY  
147 West Main St.  
Oak Harbor, OH 43449  
419-898-7001

The Oak Harbor Public Library complies with all applicable state and federal laws governing nondiscrimination in employment. We are an Equal Opportunity Employer.

Date \_\_\_\_\_

**POSITION APPLYING FOR:** \_\_\_\_\_

**APPLICANT INFORMATION:**

Name (last, First, Middle) \_\_\_\_\_

Address \_\_\_\_\_

Phone (home) \_\_\_\_\_ (Cell) \_\_\_\_\_ Email \_\_\_\_\_

Are you 18 years or older? \_\_\_ Yes \_\_\_ No      If no, provide  
birthdate: \_\_\_\_\_

Are you legally eligible for employment in the U.S.? \_\_\_ Yes \_\_\_ No

Date you can start employment: \_\_\_\_\_ Hourly pay expected: \_\_\_\_\_

Will you work evenings/weekends? \_\_\_ Yes \_\_\_ No      Are you seeking \_\_\_ full time \_\_\_ part  
time

This employment application does not seek information regarding the applicant's criminal record. However, the Library reserves the right to make inquiry into the applicant's criminal record, to conduct a criminal background check and to condition any offer of employment on the information obtained from any such inquiry or background check. In evaluating an applicant's criminal record, the Library shall make an individualized assessment, utilizing the factors permitted by the applicable law.

**EDUCATION**

	School	City/State	Major	Degree	Graduate?
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Yes or No

High School:

Technical:

College:

Other:

**RELATED SKILLS** What additional training, skills, or experiences do you have that are related to the position for which you are applying?

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**Computer skills:** *check all that apply* Windows PC \_\_\_ eReaders \_\_\_ Word \_\_\_ Excel \_\_\_  
Publisher \_\_\_ Email \_\_\_ Library Cataloging Systems \_\_\_ Other \_\_\_(explain)

**EMPLOYMENT** Please give complete information and begin with the most recent employer.

Name of employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Dates of employment from (mo./yr.) \_\_\_\_\_ to (mo./yr.) \_\_\_\_\_

Job title and duties: \_\_\_\_\_

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Name and title of supervisor

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Supervisor's work phone or email: \_\_\_\_\_ May we contact this person \_\_ Yes \_\_ No

If still employed, will contact jeopardized applicant's position? \_\_\_ Yes \_\_\_ No

Exact reason for leaving

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Name of employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Dates of employment from (mo./yr.) \_\_\_\_\_ to (mo./yr.) \_\_\_\_\_

Job title and duties:

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Name and title of supervisor

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Supervisor's work phone or email: \_\_\_\_\_ May we contact this person \_\_ Yes \_\_ No

Exact reason for leaving

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Address \_\_\_\_\_

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Job title and duties:

\_\_\_\_\_  
\_\_\_\_\_

Name and title of supervisor

\_\_\_\_\_

Supervisor's work phone or email: \_\_\_\_\_ May we contact this person \_\_ Yes \_ No

Exact reason for leaving

\_\_\_\_\_

**PROFESSIONAL REFERENCES** (People who have direct knowledge of your work or education)

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_

Phone (work): \_\_\_\_\_ Cell: \_\_\_\_\_

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

\_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_

Phone (work): \_\_\_\_\_ Cell: \_\_\_\_\_

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

\_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_

Phone (work): \_\_\_\_\_ Cell: \_\_\_\_\_

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

\_\_\_\_\_

**IT IS IMPORTANT THAT YOU KNOW:**

1. Not all applicants are called for a job interview. Only those who follow instructions for filling out the application form, submit all required documents, and who meet the posted job qualifications may be contacted. A series of skills tests may be administered during the interview process, dependent on the position.
2. A detailed work reference check will be conducted prior to extending a job offer. A criminal background check may also be necessary for certain positions. Results of background checks may affect employment status.
3. Oak Harbor Public Library is a drug-free workplace.

**Disclaimer and Signature**

**Please read each statement in this agreement carefully before signing.**

I certify that all information contained in this application is true, complete, and correct to the best of my knowledge. I understand that any material omission, misrepresentation, or falsification of this information is grounds for dismissal from or refusal of employment.

I authorize the investigation of all statements contained in this application and give permission to contact all or any of my previous employers, references, and/or schools for information unless otherwise noted in this document.

I also give my consent to a criminal background check, if the position I am applying requires one.

If 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 understand that I will be on a probationary period for 90 days from the date I start the employment.

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Signature of applicant

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Date