



Muskingum County Library System

220 N. Fifth St. Zanesville, OH 43701
Phone: 740-453-0391 Fax: 740-455-6937

Employment Application

Position applying for:

Your Contact Information

First Name

Last Name

Phone

Address

Email Address

Work desired?

Full Time

Part Time

Either

Are you at least 18 years old?

Yes

If no, date of birth

No

Education and Training

Mark circle of highest grade completed

Elementary or High School	1	2	3	4	5
	6	7	8	9	10
	11	12			
College	0	1	2	3	4
Graduate School	0	1	2	3	4

List School(s), other Specialized Training

School Name, City/State, Major/Degree

High School

College

Other

List skills appropriate to the position for which you are applying.

Are you able to perform the job function of the position for which you are applying with or without reasonable accommodation?

Experience/Previous Employment

Name and address of most recent/present employer.

Name and title of Supervisor

Employment Dates

Most recent salary

Reason for leaving

Brief description of duties

May we contact this employer? Yes No

Employer Phone #

Name and address of employer.

Name and title of Supervisor

Employment Dates

Brief description of duties

Most recent salary

Reason for leaving

May we contact this employer? Yes No

Employer Phone #

Name and address of employer.

Name and title of Supervisor

Employment Dates

Brief description of duties

Most recent salary

Reason for leaving

May we contact this employer? Yes No

Employer Phone #

Personal References

Please list any friends or relatives who currently work for the Muskingum County Library System.

Resume may be attached to application if one is available. (Please read and sign the back page before submitting application.)

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 applicable law.

I hereby declare the information provided by me in this application for employment is true, correct and complete to the best of my knowledge.

I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

I authorize you to obtain an investigative report to verify the statements made herein, using information obtained through person acquaintances, references, a check of criminal convictions and conviction of traffic offenses, or from any other source deemed appropriate.

I hereby authorize said sources to disclose such records and other information as may be requested.

Applicant Signature Date

Please note that signing this document will require the document to be saved. Please sign before submitting.

Please do not write in this space

Equal Opportunity Employer