

# APPLICATION FOR EMPLOYMENT

Frankenmuth Wickson District Library

359 S. Franklin St.

Frankenmuth, MI 48734

Phone: (989) 652-8323 • Fax: (989) 652-3450 • Website: [wicksonlibrary.org](http://wicksonlibrary.org)

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The Frankenmuth Wickson District Library is an equal opportunity employer and shall consider all qualified applicants for all positions without regard to race, color, sex, religion, national origin, age, height, weight, marital status, sexual orientation, veteran status, or disability.

Please note the following: (1) ANSWER ALL QUESTIONS COMPLETELY. FAILURE TO DO SO WILL RESULT IN REJECTION OF YOUR APPLICATION AND YOU WILL NOT BE CONSIDERED FOR EMPLOYMENT. (2) Please print legibly. (3) This application will be kept current for six (6) months from the date it was submitted.

## PERSONAL INFORMATION

Date \_\_\_\_\_ Name \_\_\_\_\_

Telephone No. \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_

Driver's License No. & State \_\_\_\_\_

Position(s) Applied for: \_\_\_\_\_

Starting Wage Desired (hourly) \$ \_\_\_\_\_

Please insert times on each day(s) you would be available to work: Monday \_\_\_\_\_ Tuesday \_\_\_\_\_

Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

If hired, when would you be available to start work? \_\_\_\_\_

Are you under 18 years of age?  Yes  No

Are you currently working?  Yes  No

Have you ever been refused a bond?  Yes  No

Will you submit to a drug screening test?  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?  Yes  No. (Proof of citizenship or immigration status will be requested upon employment.)

Have you ever been fired?  Yes  No. If yes, give date, where you worked and explanation: \_\_\_\_\_

Have you ever been convicted of a felony that has not been expunged, annulled or sealed?  Yes  No.

If yes, completely describe including location and date: \_\_\_\_\_

NOTE: A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness and nature of violation and rehabilitation will be considered.

Are you capable of performing with or without reasonable accommodation (special assistance, equipment or other help) the activities involved in the job or occupation for which you have applied?  Yes.  No.

## EDUCATION & TRAINING

	High School	Vocational/ Technical	College/ University	Graduate School
<b>School Name</b>				
<b>Did you graduate? (if not, list the number of credit hours completed).</b>	[ ]Yes [ ]No	[ ]Yes [ ]No	[ ]Yes [ ]No	[ ]Yes [ ]No
<b>Degree(s)/Certification(s)</b>				
<b>Major/Minor</b>				

Describe any specialized training, apprenticeships, internships, skills, licenses, certificates and extra curricular activities that pertain to the position(s) for which you are applying. \_\_\_\_\_

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Do you have experience using Microsoft Office? \_\_\_\_\_

eBook readers? \_\_\_\_\_

iPad and/or android tablets? \_\_\_\_\_

List outside interests/hobbies. \_\_\_\_\_

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## EMPLOYMENT HISTORY

Employer	Dates		Work Performed
	From	To	
Address & Telephone No.			
Job Title	Hourly Rate/Salary		
Supervisor			
Reason(s) for leaving			

Employer	Dates		Work Performed
	From	To	
Address & Telephone No.			
Job Title	Hourly Rate/Salary		
	Start	End	
Supervisor			
Reason(s) for leaving			

**REFERENCES**  
(Do not include relatives)

NAME	ADDRESS	TELEPHONE

**ADDITIONAL COMMENTS**

Feel free to use this space to provide additional information as requested in this application or to briefly explain why you desire employment with the Frankenmuth Wickson District Library.

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**APPLICANT'S AGREEMENT & UNDERSTANDING**

1. I certify that the information in this application is true, complete and correct to the best of my knowledge and understand that falsification, misleading, misrepresenting or omission of any information submitted in connection with my application or interview, whether in this document or not, may result in rejection of my application or, if hired, in dismissal.
  
2. I waive written notice from my current employer and from any of my former employers regarding the disclosure of disciplinary reports, letters of reprimand, or other notices of disciplinary action contained in my personnel records (even if more than four years old). This waiver is made pursuant to the Bullard-Plawecki Employee Right-to-Know Act.
  
3. I authorize the references and current and former employers listed in this application to give you any and all information concerning my current and previous employment and any pertinent information they may have (even if more than four years old) and release all parties from any liability or any damages that may result from furnishing same to you.
  
4. I authorize Frankenmuth Wickson District Library to release any information (even if more than four years old) relating in any way to my employment including disciplinary reports, letters of reprimand or other notices of disciplinary action when such information is requested by any prospective or subsequent employers without any obligation (by them or you) to give me any notice of such disclosure.
  
5. I understand that any employment offer is conditional upon the result of the drug screening test and the post offer pre-employment medical examination.
  
6. I have read the attached job description. If employed, I understand that if I am disabled or become disabled and am in need of accommodations for employment, I must notify the Wickson District Library, in writing, within 182 days after the need is known or should have been known to me. Failure to properly notify the Library will preclude any claim that the employer fails to accommodate the disability.
  
7. I agree that if I should be hired that any claim or lawsuit relating to my service with the Frankenmuth Wickson District Library, The Library Board, or any of its committees must be filed no more than six (6) months after the date of the employment action that is subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

**I HAVE READ, UNDERSTAND AND AGREE TO THE TERMS OF EACH OF THE SEVEN (7) INDIVIDUAL STATEMENTS SPECIFIED ABOVE.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Signature of Library employee receiving application:**

Signature \_\_\_\_\_ Date \_\_\_\_\_