

Manhattan Public Library

629 Poyntz Avenue • Manhattan, KS 66502
785-776-4741 • www.mhklibrary.org

Employment Application

INSTRUCTIONS - PLEASE READ CAREFULLY

All requested information must be furnished. Fill in all spaces accurately and completely. If an item does not apply to you, or if there is no information to be given, write the letters "NA" for "not applicable." All information contained in the application is subject to verification. Omissions or erroneous statements may be cause for rejection of this application, removal from employment eligibility, or discharge from the library.

We Are An Equal Opportunity Employer Manhattan Public Library is committed to equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Job-related experience and other qualifications will be considered without discrimination on grounds of race, color, national origin, religion, disability, ethnicity, pregnancy, age, military status, sex, genetic information, sexual orientation or gender identity, or any other characteristic protected by applicable federal, state, or local law. All information provided in this application will be treated confidentially, and if you are employed, will be used only to help assure the best use of your abilities.

You will be notified if you are selected for an interview. Depending on the department manager's schedule and workload, this could be anywhere from a few days to a few weeks.

We do not keep applications on file for future openings. Please monitor our web site for positions that might be available at a later time and complete another application.

First Name _____ Last Name _____

Home Address _____ Unit / Apt. Number _____

City _____ State _____ Zip Code _____

Email Address _____

Primary Phone Number _____ Secondary Phone Number _____

When is the best time for us to reach you via telephone? Morning Afternoon Evening

What position are you applying for? _____

If you are interested in more than one position, you must fill out an application form for each one.

Have you ever been employed by Manhattan Public Library? Yes No If yes, when?

What department and position? _____ Who was your supervisor? _____

Names of any relatives or domestic partners employed by Manhattan Public Library:

Are you 18 or older? Yes No If hired, when can you start? _____

If hired, can you furnish proof that you are legally entitled to work in the U.S.? Yes No

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Employment History

Detail each position for the **past ten years and account for any gaps** in employment during that period. Attach separate sheet if necessary.

Employer:	Position and duties:
Employment dates:	Reason for leaving:
Name of supervisor:	Phone number:
Employer:	Position and duties:
Employment dates:	Reason for leaving:
Name of supervisor:	Phone number:
Employer:	Position and duties:
Employment dates:	Reason for leaving:
Name of supervisor:	Phone number:
Employer:	Position and duties:
Employment dates:	Reason for leaving:
Name of supervisor:	Phone number:

The library has my permission to contact any of my present or past employers. Yes No
If no, state reason _____

List at least three persons who have knowledge of your work performance within the last ten years. Please include professional references only. Do not include relatives.

First and Last Name	Telephone Number	Email Address	Address	City, State, Zip

Acknowledgments and Signature

- I certify that the information contained in this application is true complete and correct. I understand that misstatements, misrepresentation, or omissions of facts may be cause for rejection of this application or dismissal in accordance with Manhattan Public Library policy.
- My signature authorizes the Manhattan Public Library to secure my driving record (if the position requires driving), transcripts from educational institutions to verify credits/degrees, and information needed to obtain a criminal background check.
- I authorize the references provided to give any and all information concerning previous employment or any other pertinent information they may have. I release all parties from all liability that may result from furnishing this information to you.
- I understand this is an application for employment and that no employment contract is being offered. I understand that if I am employed, such employment is at-will and that the library may change the terms and conditions of employment at any time.

Your signature below indicates that you agree to the terms and conditions listed above.

Signature _____ **Date** _____