

Madison Public Library Employment Application

39 Keep St.
Madison, N.J. 07940
EOE/ADA

The Madison Public Library considers applicants for all positions without regard to age, race, creed, color, national origin, ancestry, marital or veteran status, gender, affectional or sexual orientation, domestic partnership status, disability, or any other characteristic protected from discrimination by law.

(PLEASE PRINT OR TYPE ALL INFORMATION)

Date of Application_____

Name_____

Address_____

Telephone #s_____ Social Security #_____

Email Address_____

Instructions for completing this application:

Your resume can be submitted with the application; however, all questions on this application must be fully answered. Do not indicate "See Resume" on any part of this application and then leave sections blank. This application requests more information than can be obtained from a resume. If a question does not apply, please write N/A.

Provide complete names, addresses and telephone numbers for all employers, references, and educational institutions.

Be sure to sign and date the last page of this application in the Applicant's Statement section.

All information obtained will be kept confidential and will be provided to only those persons involved in the screening and hiring processes.

If you are under 18 years of age, can you provide the necessary proof of your eligibility to work
(yes____no____)

Are you currently employed? (yes____no____)

May we contact your current employer? (yes____no____)

Are you able to provide proof of your eligibility to work in the United States? (yes____no____) Proof of employment eligibility will be required upon employment.

Date available to begin work? _____

What is your availability to work?

Full-time _____

Part-time _____ Daytime _____ Evening _____ Weekend _____

Can you travel if a job requires it? (yes _____ no _____)

Education

Name & Complete Address	Course of Study	# Years Completed	Diploma or degree (be specific)
High School			
Undergraduate			
Graduate			
Technical Other (please specify)			

Describe any specialized skills, training, extracurricular activities that you have performed or been involved with. (You can exclude membership that would indicate any characteristic protected from discrimination by law).

List any professional, trade, business or civic activities and offices held. (You can exclude membership that would indicate any characteristic protected from discrimination by law.)

Additional Information (any experience, specialized skills, information, job-related skills that might be helpful in consideration of your application)

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING OR HAVE RECEIVED A COPY OF THE JOB DESCRIPTION

With or without reasonable accommodation, are you able to perform in a reasonable manner the activities involved in the job for which you are applying? A review of the activities involved in this position has been given.

Yes _____ No _____

Business References

References requested must be business/work references, excluding relatives and those already mentioned previously. Please provide three. These references will be contacted after an interview, if you are seriously considered for employment. If for some reason you do not have three business/work references, please indicate as such below.

Name, Complete Address & Telephone #	Relationship
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Applicant's Statement

I certify that all information I have provided in this Employment Application is true and complete. I authorize the Madison Public Library/Borough of Madison, its representatives, employees or agents to investigate all statements contained in this Employment Application as may be necessary in arriving at an employment decision. I also authorize the Madison Public Library/Borough of Madison, its representatives, employees, or agents to contact and obtain information from all references, employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby release the Madison Public Library/Borough of Madison, its representatives, employees or agents from any liability for seeking, gathering and using such information in the employment process; I hereby release all other persons, corporations or organizations from any liability for furnishing such information about me.

I understand that any information provided by me that is found to be false or misleading in any respect will be sufficient cause to cancel further consideration of this application or immediately discharge me from the Madison Public Library's/Borough of Madison's service, whenever it is discovered.

I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Madison Public Library/Borough of Madison is of an "at will" nature, which means that the Employee can resign at any time and the Madison Public Library/Borough of Madison may discharge the employee at any time with or without cause. Additionally, I understand that this Employment Application does not constitute an agreement or contract for employment for any specific period or definite duration. It is also understood that this "at will" employment relationship may not be changed by any written document, assurances to the contrary or implied oral or written agreements unless it is specifically acknowledged in writing by a Madison Public Library/ Borough of Madison authorized representative.

I understand that if employed by the Madison Public Library/Borough of Madison I must abide by all of its rules and regulations.

I certify that I have read, understand, and accept all terms of this Application and Statement.

Signature of Applicant

Date

Employment History

Please list all employment, including military service and self-employment. Start with your current or most recent employer. If the HR Department for an employer is located at another site, please also provide that complete location address and telephone number. If the company has closed the location where you worked or if the company has been sold to another company, please provide a location where this employment can be verified. Attach additional pages if needed.

Job Title	Supervisor Name and Title.	Employer Name, Complete Address & Phone Number Tele #: ()
Start Date	End Date	Nature of work performed/Job Responsibilities
Reason for Leaving	Can we contact for a reference Y N	
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