APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE ALL SECTIONS OF THIS APPLICATION ATTACH SEPARATE SHEET FOR ANY ADDITIONAL INFORMATION.
PLEASE TYPE OR PRINT

(5/13)

Position applied for__________________________________________________ Resume Attached  □Yes □No

If position applied for is in public services area please (x) Reference
□Adult □YA □Children’s □Clerical □Other

Department________________________________________ Date__________________________

Applicant’s Name________________________________________ Home Phone_____________________

Address________________________________________ State________ Zip________________________

ECPL EMPLOYEES MAY BE REASSIGNED INITIAL ASSIGNMENT IS SUBJECT TO CHANGE, BASED ON LIBRARY NEEDS

EDUCATION AND OTHER INFORMATION

High School________________________________________ Graduated □Yes □No
GED □Yes □No

College________________________________________ From_______ To_______ Degree_______
College________________________________________ From_______ To_______ Degree_______
Graduate School________________________________ From_______ To_______ Degree_______

Additional Education and/or training
___________________________________________________________________________________
___________________________________________________________________________________

Clerical/Mechanical Skills
___________________________________________________________________________________
___________________________________________________________________________________

Knowledge Skills and other activities
___________________________________________________________________________________
___________________________________________________________________________________

Professional memberships and other activities
___________________________________________________________________________________
___________________________________________________________________________________

Is anyone of the library staff a relative? □Yes □No
Have you ever been convicted of a felony? □Yes □No    If Yes, explain________________________________

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EXPERIENCE

SEE REVERSE SIDE
Start with your current position. Give separate treatment to each position held. Account for major periods of unemployment in separated blocks. In your description of duties, include the most important knowledge, skill, and abilities related to the job. Describe experiences related to the position applied for.

Name of Employer___________________________________________ Avg. hrs. worked per week____ Salary______ _
Address (if not ECPL)_______________________________________
City_________________________________ State____ ______  Zip_______________________
Date from_______________________________ To________ ____________________________
Description of responsibilities and duties
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
Reason for leaving
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
May we contact this employer for references?   ☐Yes ☐No

Name of Employer___________________________________________ Avg. hrs. worked per week____ Salary______ _
Address (if not ECPL)_______________________________________
City_________________________________ State____ ______  Zip_______________________
Date from_______________________________ To________ ____________________________
Description of responsibilities and duties
__________________________________________________________________________
__________________________________________________________________________
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Reason for leaving
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Description of responsibilities and duties
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
Reason for leaving
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
May we contact this employer for references?   ☐Yes ☐No

In order to help East Cleveland Public Library meet it’s obligations as an affirmative action/equal employment opportunity employer, please complete the following:

I learned of this position vacancy from the following source. (CHECK ONLY ONE)
☐Job Posting in ECPL Facility   ☐Job Posting in Agency Other Than ECPL Facility
☐Newspaper   ☐Phone Call/Visit to ECPL Personnel Department
☐Other (Please Be Specific)_________________________ ________________________________________________

BY SIGNING THIS APPLICATION, I CERTIFY THAT THE INFORMATION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND THAT I HAVE NOT MADE ANY ATTEMPTS TO CONCEAL INFORMATION. FALSIFICATION IS CAUSE FOR REJECTION OF APPLICATION OR DISMISSAL.

APPLICANT’S SIGNATURE__________________________________________  DATE_____________________

TRANSCRIPTS AND REFERENCES MAY BE REQUESTED

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