

# EMPLOYMENT APPLICATION

## Fairfield County District Library

Qualified applicants will be considered for employment in compliance with all Federal and State equal employment laws.

Please return this application to:

Fairfield County District Library  
Attn: Administration  
219 N. Broad Street  
Lancaster, OH 43130

Fax: (740) 653-4199

Email: [lyost@fcdlibrary.org](mailto:lyost@fcdlibrary.org)

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**IMPORTANT: Complete all sections. Please print in ink**

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Date: \_\_\_\_\_

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Street Address \_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

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### General Information

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*Check all that apply. Please note that Library positions require day, evening, and weekend shifts.*

Preferred Locations:  Lancaster  Amanda  Baltimore  Bremen  Carroll  
 Full time  Part time  Any available position

What type of job are you interested in?

Public Service  Youth Service  Custodial  Clerical/Administrative  \*Professional Librarian  
(\*Requires MLS or MLIS)

Please check the box for hours you are available to work:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

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### Education

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	Name	City	Years Completed	Major/Field of Study
High School				
College/University				
Other				

Computer skills:  Microsoft Word  Microsoft Excel  Internet Searching

List any other computer skills: \_\_\_\_\_

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## **Work Experience**

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**List your three most recent jobs.**

Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Dates worked (month/year): \_\_\_\_\_ to \_\_\_\_\_ Job duties: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone No. ( \_\_\_\_\_ ) May we contact: \_\_\_\_\_

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Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Dates worked (month/year): \_\_\_\_\_ to \_\_\_\_\_ Job duties: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone No. ( \_\_\_\_\_ ) May we contact: \_\_\_\_\_

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Company: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Dates worked (month/year): \_\_\_\_\_ to \_\_\_\_\_ Job duties: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone No. ( \_\_\_\_\_ ) May we contact: \_\_\_\_\_

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Please note any volunteer work or experience that may relate to the position applied for:

At the present time, do you have an immediate family member working for the Fairfield County District Library?  
(Immediate family is defined as spouse, child, stepchild, grandchild, parent, grandparent, brother, sister, or a person residing in the trustee or employee household.)  Yes  No

If yes, please list \_\_\_\_\_

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## **Agreement: Please read before signing**

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I certify that the answers given herein are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my employment and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given on the application or in the interview(s) may result in discharge. I understand that any offer of employment is contingent upon my ability to comply with the Immigration and Naturalization Service regulations establishing my identity and right to work in the United States. 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 agree that should I become employed, as a condition of my employment and in consideration of my employment, that I will conform to the rules and policies of the Fairfield County District Library and I understand that my employment can be terminated by the Library for any reason not contrary to law. I further understand that should I become employed by the Library that I will not be guaranteed employment for any specific period of time, nor will I be guaranteed any specific pay or benefits, as the Library can change pay and benefits. Moreover, I understand that if I become employed I can terminate my employment at the Library for any reason at any time, though the Library requests the courtesy of 2-weeks notice of resignation. Finally, I understand that no supervisor or representative of the Fairfield County District Library, other than the Director, has the authority to enter into any agreement with me contrary to the foregoing, and any agreement with the Director contrary to the foregoing must be in writing to be valid.

I agree that any claim or lawsuit relating to my service with the Fairfield County District Library or any of its branches or subsidiaries must be filed no more than six (6) months after the date of employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary.

This application shall be considered active for no more than six (6) months. After that time applicants will be required to resubmit a complete application.

Signature \_\_\_\_\_

Date \_\_\_\_\_