Alvah N. Belding Library Application for Employment

302 East Main Street Belding, Michigan 48809-1799 Phone: 616/794-1450

Please read all instructions carefully and complete all sections of the application completely and accurately. It is your responsibility to provide sufficient information on this application to indicate that you meet the minimum qualifications for the job for which you wish to be considered. ANBL will accept applications only for posted vacancies with specific posting periods. Your application will remain active until the position for which you are applying has been filled or recruitment has concluded.

Position applied for:	Date of Application:
Name:	
Address:	
City/State/Zip:	
Telephone:	
Are you a citizen of the U.S. or do you have permission to work in the U.S.?	☐ Yes ☐ No
Are you under the age of 18? ☐ Yes ☐ No	
Are you on a lay-off and subject to recall? ☐ Yes ☐ No	
Have you ever been employed under a different name? ☐ Yes ☐ No If so, what name?	
Working conditions desired: Check as many as are applicable. Unchecked connote: Most positions require some evening and/or Saturday hours.	onditions are assumed to be "no".
Part-time? ☐ Yes ☐ No Mornings? ☐ Yes ☐ No Evenings? ☐ Yes ☐ No	Afternoons? ☐ Yes ☐ No Saturdays? ☐ Yes ☐ No
Are you currently under a charge or have you ever been convicted of a crime,	except a minor traffic violation?□ Yes □ No
If so, please state citation, date and place where offense occurred?	
Are you a Veteran of the U.S. Military? ☐ Yes ☐ No If yes, name Brand	ph:
Are you able, with or without reasonable accommodation, to perform and fulfill job for which you are applying? $\ \square$ Yes $\ \square$ No	all of the essential duties and requirements of the
Do you have any relative (by blood or marriage) employed with Alvah N. Beldi. If so, name and relationship:	ng Library? 🗆 Yes 🗆 No

Employment Experience:

In the space provided below give a record of every employment (including periods of military service) and every period of unemployment since you first began to work. Describe any training or experience in the military service which may be related to the position for which you are applying. Start with your present job and work backwards to the first job you ever held. Give name used on payroll if different from that given on this application. If you have never been employed, state that fact in the space below.

Employer:	Date Started	Date Ended	Work Performed
Address:		-	
Phone: .	Start Wage	Final Wage	
Supervisor:			
Reason for Leaving:			
Employer:	Date Started	Date Ended	Work Performed
Address:			
Phone:	Start Wage	Final Wage	
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Supervisor:			
Reason for Leaving:			
Employer:	Date Started	Date Ended	Work Performed
Address:			
Phone:	Start Wage	Final Wage	
Supervisor:			
Reason for Leaving:			
Employer:	Date Started	Date Ended	Work Performed
Address:			
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Phone:	Start Wage	Final Wage	
Supervisor:			
Reason for Leaving:			

Employment Experience continued:

Employer:	Date Started	Date Ended	Work Performed
Address:			
Phone:	Start Wage	Final Wage	
Supervisor:			
Reason for Leaving:			
Employer:	Date Started	Date Ended	Work Performed
Address:			
Phone:	Start Wage	Final Wage	
Supervisor:			
Reason for Leaving:			
Employer:	Date Started	Date Ended	Work Performed
Address:			
Phone:	Start Wage	Final Wage	
Supervisor:			
Reason for Leaving:			
Employer:	Date Started	Date Ended	Work Performed
Address:			
Phone:	Start Wage	Final Wage	
Supervisor:			
Reason for Leaving:			
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We may contact the	employers listed above unless you inc	dicate that you do not want us	to contact them. List below
Do NOT Contact:			
Reason:			

Use the space below to enter any information which you feel would be useful as an aid in determining your fitness for the position for which you are applying. You may wish to include volunteer or other uncompensated work experience, informal training, self-study, hobbies, work experience not shown elsewhere on the application, etc. For Library Page position, please indicate you schedule availability.					
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References:

In the space provided below give the names of three persons **not related to you**, preferably persons with whom or for whom you have worked, who have knowledge of your experience and fitness for the position for which you are applying.

Full Name	Business or Home Address	Business or Home Phone	Business or Occupation

EDUCATION:

	Name & Location of School	Dates attended	Degree, Certificate Or Diploma	Subject/Major
HIGH SCHOOL				
COLLEGE, TRADE OR TECHNICAL SCHOOL				
COLLEGE, TRADE OR TECHNICAL SCHOOL				
COLLEGE, TRADE OR TECHNICAL SCHOOL				

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING TO INDICATE YOUR UNDERSTANDING Applicant's Statement

I certify that answers given in this application are true, complete, and correct to the best of my knowledge and are made in good faith. I understand that any false statements, as well as misrepresentations or omissions, on this application are sufficient grounds for rejection of this application or, if employed, may result in termination.

I hereby authorize my former employers to give any information regarding my employment including worker's compensation together with any information they may have regarding me, whether or not it is on their records. I hereby release them and their company of all damage whatsoever for issuing same to Alvah N. Belding Library. I hereby authorized any police agency to give any information regarding any record they may have on me, and release them from any damage whatsoever for issuing same to Alvah N. Belding Library. I hereby authorize any educational institution listed on this application to release information regarding any record they may have on me and release them from any damages whatsoever for issuing same to Alvah N. Belding Library

I understand that this application is not, and is not intended to be, a contract of employment.

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Signature of Applicant			Date	