# **Application for Employment**

Cheltenham Township Library System

215 S. Keswick Avenue Glenside, PA 19038 215-885-0457

#### WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

#### **PLEASE PRINT**

Application Information:						
Position(s) applied for:	Date of application:					
How did you hear about this job opportunity?:			r			
Contact Information:						
Last name First name	Middle name					
Address Number Street	City State	ZIP	Code			
Phone number(s)	Email address					
Best time to contact you:	1	:	AM PM			
General Employment Information:						
If under 18 years of age, can you provide required proof of yo	ur eligibility to work?	🗆 Yes	🗆 No			
Have you ever filed an application with us before? If yes, give date:						
Have you ever been employed with us before? If yes, give date:	□ Yes	🗆 No				
Do any of your friends or relatives (other than spouse) work h	□ Yes	🗆 No				
Are you currently employed?	🗆 Yes	🗆 No				
May we contact your present employer?	Yes	🗆 No				
Are you prevented from lawfully becoming employed in this co Proof of citizenship or immigration status will be required upon em	🗆 Yes	🗆 No				
Date available for work://	Desired salary range:					
Are you available to work:  Full-time Part-time please indicate Temporary please indicate	/					
Are you currently on "lay-off" status and subject to recall?	□ Yes	🗆 No				
Can you travel if the job requires it?	Yes	🗆 No				

### Education

	School name and address	Course of study	# of years completed	Diploma Degree
Elementary school				
High school				
Undergraduate college				
Graduate Professional				
Other (Specify)				

### **Employment Experience**

Start with your present or last job. Include job-related military service assignments and volunteer organizations. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected statuses.

1.	Employer	Address	Work performed
	Supervisor	Phone number(s)	
	Job title	Dates employed -   From: To:	
	Reason for leaving		
2.	Employer	Address	Work performed
	Supervisor	Phone number(s)	
	Job title	Dates employed -   From: To:	
	Reason for leaving	·	
3.	Employer	Address	Work performed
	Supervisor	Phone number(s)	
	Job title	Dates employed -   From: To:	
	Reason for leaving	· · · · · · · · · · · · · · · · · · ·	
4.	Employer	Address	Work performed
	Supervisor	Phone number(s)	
	Job title	Dates employed -	
	Reason for leaving		

If you need additional space please continue on a separate sheet of paper.

# **Employment Experience Cont.**

List any professional, trade, business or civic activities and offices held. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected statuses:				

### Specialized Skills

Dewey Decimal System	Polaris ILS	Other (list)
Microsoft Word	□ Mac computers	
Microsoft Excel	Adobe Creative Suite	

#### Describe any specialized training, job-related military training, apprenticeship and extra-curricular activities:

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### **Additional Information**

	Professional References:					
1.	Name Phone number					
	Address					
2.	Name	Phone number				
	Address					
3.	Name	Phone number				
	Address					

State any additional information you feel may be helpful to us in considering your application:

#### Do not answer this question unless you've been informed of the requirements of the job for which you are applying.

Can you perform the essential functions of the job for which you are applying, either with or without reasonable accomodation?

🗆 Yes 🗆 No

## **Applicant's Statement**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relations with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant

Date

### Personnel Department Use Only

APPLICATION STATUS						
Application received://	Position(s) is open?	🗆 Yes	🗆 No	Arrange interview?	🗆 Yes	🗆 No
Position(s) considered for:						

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