



STAFF USE ONLY	
Date Application Received _____	Staff Initials _____

27550 Main Road, PO Box 935, Cutchogue, NY 11935
 (631)734-6360

Application for Employment

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

-- PLEASE PRINT --	
Position(s) Applied For	Date of Application
How did you learn about us?	
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Social Media <input type="checkbox"/> Inquiry <input type="checkbox"/> Library Website <input type="checkbox"/> Other _____	

Last Name	First Name	Middle Initial
Street Address	City	State Zip Code
Telephone Number(s)	Email	

Have you ever filed an application with the Library before? <i>If yes, give date</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed by the Library before? <i>If yes, give date</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do any of your friends or relatives work at the Library or serve on the Board of Trustees? <i>The Library has an Anti-Nepotism Policy which stipulates that relatives of current employees or Trustees are ineligible for employment.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May the Library contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you prevented lawful employment in this country because of visa or immigration status? <i>Proof of citizenship or immigration status will be required upon employment</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you travel if the job requires it?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a felony or misdemeanor?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Date available to start work ___/___/___	What is your desired salary range? _____
Are you available to work:	
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time (<i>please indicate when available: <input type="checkbox"/> morning <input type="checkbox"/> afternoon <input type="checkbox"/> evening</i>) <input type="checkbox"/> Temporary (<i>please indicate dates available: ___/___/___ - ___/___/___</i>)	

This application for employment is 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 whether or not applications are being accepted at that time. The Cutchogue New Suffolk Free Library is an Equal Opportunity Employer.

Education	Name of school	Course of study	# of years completed	Diploma degree
High School				
Undergraduate				
Graduate/Professional				
Other (specify)				

Describe any specialized training, internship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

List professional, trade, business or civic activities and offices held.
You may exclude membership which would reveal race, color, religion, creed, gender, gender identity, gender expression, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

Specialized Skills *Check skills and/or equipment.*

<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Microsoft Office	<input type="checkbox"/> Sierra ILS
<input type="checkbox"/> PC/MAC	<input type="checkbox"/> Email	<input type="checkbox"/> Photocopier	<input type="checkbox"/> Audiovisual equipment
<input type="checkbox"/> Other			

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, creed, gender, gender identity, gender expression, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

1.	Employer		Dates Employed		Work Performed	
			From	To		
	Address					
	Telephone Number(s)					
	Job Title	Supervisor				
Reason for leaving						
2.	Employer		Dates Employed		Work Performed	
			From	To		
	Address					
	Telephone Number(s)					
	Job Title	Supervisor				
Reason for leaving						
3.	Employer		Dates Employed		Work Performed	
			From	To		
	Address					
	Telephone Number(s)					
	Job Title	Supervisor				
Reason for leaving						
4.	Employer		Dates Employed		Work Performed	
			From	To		
	Address					
	Telephone Number(s)					
	Job Title	Supervisor				
Reason for leaving						

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

Additional qualifications or information you feel may be helpful to us in considering your application.

References Please list three references.

Name	Phone
Address	
Name	Phone
Address	
Name	Phone
Address	

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. I understand that a background check may be conducted.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Cutchogue New Suffolk Free Library is of an "at will" nature, which means that the employee may resign at any time and the employee may be discharged at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Director of the Library.

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 the rules, regulations and policies of the Cutchogue New Suffolk Free Library.

Signature of Applicant

Date

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Position(s) applied for is open Yes No

Position(s) considered for _____

Arrange for Interview Yes No

Interview Date _____ Interviewer _____

Remarks _____
