

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.

	_	N = 4 6 = D D V V =				
	P	PLEASE PRINT -				
Position(s) Applied For	<del></del>			Date of Applica	tion	
How did you learn about us?				.I		
☐ Advertisement	☐ Friend/Relative	☐ Social Media				
☐ Inquiry	☐ Library Website	□ Other				
Last Name	Name		Middle Initial			
Street Address	City		State	Zip Code		
	- 3			r		
Telephone Number(s)		Email				
Have you ever filed an applica	ation with the Library bef	fore? If yes, giv	ve date		□ Yes	□ No
Have you ever been employed by the Library before?  If yes, give date					□ Yes	□ No
Do any of your friends or rela					_	_
-	The Library has an Anti-Nepotism Policy which stipulates that relatives of current employees or Trustees $\Box$ Yes $\Box$ No must disclose their relationship prior to consideration.					⊔ No
Are you currently employed?					□No	
May the Library contact your present employer?					□ Yes	□ No
Are you prevented lawful employment in this country because of visa or immigration status?					ПМо	
Proof of citizenship or immigration status will be required upon employment					□ NO	
Are you currently on "lay-off" status and subject to recall?					□ Yes	□ No
Can you travel if the job requires it?					□ Yes	□ No
Have you ever been convicted of a felony or misdemeanor? ☐ Yes ☐ No				□ No		
Date available to start work// What is your desired salary range?						
Are you available to work: □ Full-time						
$\square$ Part-time (please indicate when available: $\square$ morning $\square$ afternoon $\square$ evening)						
☐ Temporary (please indicate dates available://)						

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			completed		
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, tra	de, business or civic activi	ties and offices held.			
You may exclude members origin, age, disability, sexu	ship which would reveal race, co ual orientation, citizenship statu	lor, religion, creed, gender, g s, genetic information or any	ender identity, gen other legally prot	der expression, national ected status.	
Specialized Skills	Check skills and/or equipmen	t.			
☐ Microsoft Word	☐ Microsoft Excel	☐ Microsoft Office	e 🗆 S	ierra ILS	
□ PC/MAC	□ Email	☐ Photocopier		udiovisual equipment	
□ 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 Er	nployed	W 1 D 6	
			From	To	Work Performed	
	Address					
	Telephone Number(s)					
	Job Title	Supervisor				
	Reason for leav	ing				
2.	Employer		Dates Er		Work Performed	
	Address		From	To		
	Telephone Num	nber(s)				
	Job Title	Supervisor				
	Reason for leav	ing				
3.	Employer		Dates Er		Work Performed	
	Address		From	To		
	Telephone Num	nber(s)				
	Job Title	Supervisor				
	Reason for leav	ing				
4.	Employer		Dates Er From	nployed To	Work Performed	
	Address		Prom	10		
	Telephone Number(s)					
	Job Title	Supervisor				
	Reason for leav	ing				

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

Additional qualifications or information you for application.	eel may be helpful to us in considering your
References Please list three references.	
Name	Phone
Address	
Name	Phone
Address	<u> </u>
Name	Phone
Address	
application for employment as may be necessary in a background check may be conducted.  I hereby understand and acknowledge that, unless relationship with the Cutchogue New Suffolk Free Libra may resign at any time and the employee may be disunderstood that this "at will" employment relationship unless such change is specifically acknowledged in writ.  In the event of employment, I understand that fals	e. I authorize investigation of all statements contained in this arriving at an employment decision. I understand that a otherwise defined by applicable law, any employment ary is of an "at will" nature, which means that the employee scharged at any time with or without cause. It is further may not be changed by any written document or by conducting by the Director of the Library.  The or misleading information given in my application or that I am required to abide by all the rules, regulations and
Signature of Applicant	Date
STAFF	GUSE ONLY
Position(s) applied for is open ☐ Yes ☐ No Position(s) considered for	
Arrange for Interview	Interviewer