



Employment Application

11767 Beechwood Street
Princess Anne, Maryland 21853
Phone: (410)651-0852; Fax: (410)651-1388
www.somelibrary.org

Somerset County Library is an Equal Employment Opportunity Employer. We make all employment decisions without regard to race, color, religion, sex, national origin, age, disability, veteran status, marital status, citizenship, sexual orientation, or any other protected classification which may be applicable under Maryland and Somerset County laws.

Position applying for: _____ Full-time <input type="checkbox"/> Part-time/Substitute <input type="checkbox"/>
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Name _____ Last First Full Middle Name
Previous names under which you have worked, attended school, or served in the armed forces: _____
Address _____ City _____ State _____ Zip code _____ Home phone _____ Cell phone _____ E-mail _____
Have you ever been employed with Somerset County Library? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, from ___/___/___ to ___/___/___
Are you at least 14 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any relatives who work for Somerset County Library or serve on its Board of Trustees? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list their names, department(s), and relationship(s) to you: _____

EDUCATION	
Name/Address of High School, Military, College/University or Trade Schools	Diploma/Degree
_____	_____
_____	_____
_____	_____
_____	_____

PROFICIENCIES

Please indicate your level of proficiency with the following

(1 = Haven't used, 5 = Expert).

	1	2	3	4	5
Library circulation software: check out, check in, etc.					
Accounting software Name of software used:					
Automated HR system Name of software used:					
Windows OS					
Spreadsheets					
Word processing					
Databases (FileMaker, Base, Access, etc.)					

Other PC software/operating systems: _____

Identify any additional knowledge, skills, qualifications, publications, awards, scholarships, or extracurricular activity relevant to the position for which you are applying (you may exclude those that suggest race, religious creed, sex, marital status, age, color, national origin, or disability).

Describe any on-the-job and/or military training you have completed that relates to the job for which you are applying.

Please list all languages, other than English, in which you are fluent. Please note whether you are a fluent speaker, reader and/or writer.

REFERENCES

Provide the name, address and phone number of three professional references who can comment on present/past work performance.

Name	Address	Phone	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT HISTORY – Paid, Unpaid, Military

Although you may attach a resume to further describe your qualifications, it **does not** substitute for completing the application form. An incomplete application form, as well as partial information, may result in disqualification.

List your complete work record, beginning with your most recent experience. Include volunteer and military service. Describe primary duties as completely as possible. If more space is needed, make a photocopy of this page, or use separate sheet(s) prepared in the same format (including dates, hours, and salary information) and attach securely.

Employer _____ Phone (____) _____
Address _____
Street _____ City _____ State Zip code _____
Name of supervisor _____ Employed From: _____ To: _____
Supervisor's title: _____ (Mo/Yr) __ (Mo/Yr) __
Position: _____
Duties: _____ Reg. hours per week: _____
_____ Salary: \$ _____
_____ May we contact current employer: _____
_____ _ yes _ not at this time

Reason for leaving: _____

Employer _____ Phone (____) _____
Address _____
Street _____ City _____ State Zip code _____
Name of supervisor _____ Employed From: _____ To: _____
Supervisor's title: _____ (Mo/Yr) __ (Mo/Yr) __
Position: _____
Duties: _____ Reg. hours per week: _____
_____ Salary: \$ _____

Reason for leaving: _____

Employer _____ Phone (____) _____
Address _____
Street City State Zip code
Name of supervisor _____ Employed
Supervisor's title: _____ From: To:
Position: _____ (Mo/Yr) __ (Mo/Yr) __
Duties: _____ Reg. hours per week:

Salary: \$ _____

Reason for leaving:

Employer _____ Phone (____) _____
Address _____
Street City State Zip code
Name of supervisor _____ Employed
Supervisor's title: _____ From: To:
Position: _____ (Mo/Yr) __ (Mo/Yr) __
Duties: _____ Reg. hours per week:

Salary: \$ _____

Reason for leaving:

Employer _____ Phone (____) _____
Address _____
Street City State Zip code
Name of supervisor _____ Employed
Supervisor's title: _____ From: To:
Position: _____ (Mo/Yr) __ (Mo/Yr) __
Duties: _____ Reg. hours per week:

Salary: \$ _____

Reason for leaving:

Employer _____ Phone (____) _____
Address _____
Street City State Zip code
Name of supervisor _____ Employed
Supervisor's title: _____ From: To:
Position: _____ (Mo/Yr) __ (Mo/Yr) __
Duties: _____ Reg. hours per week:

Salary: \$ _____

Reason for leaving:

ADDITIONAL INFORMATION

Have you ever been convicted of a crime, other than misdemeanor? *Conviction will not necessarily disqualify you for employment.* Yes No

If yes, please explain: _____

Have you ever been discharged from a position (or released during probation) or have you ever been forced to resign? *Answering Yes will not necessarily disqualify you for employment.* Yes No

If yes, please explain: _____

Do you have any relatives currently employed by Somerset County Library? Yes No

Please name: _____

Having a relative employed with the Library will not necessarily disqualify you from being considered for employment.

How did you learn about this position?

Desired salary: _____

Date you are available to start work: ____/____/____

Many positions require weekend and evening hours. Are there any times that you cannot work? Yes No

If yes, please specify _____

CERTIFICATION and AUTHORIZATION

I certify that the statements made in this application are accurate and complete to the best of my knowledge. I understand that false statements, omissions of material facts or misleading information may result in disqualification for consideration of employment or immediate termination of employment.

I authorize Somerset County Library and its agents to conduct reference and background checks, and a drug screening and fingerprinting for certain positions. I also understand that the background check may include a credit check. I hereby release Somerset County library, its agents and those it contacts from any liability whatsoever as a result of such contact and the information provided and received. Pursuant to the Fair Credit and Reporting Act (FCRA), I understand that I have a right to make a written request within a reasonable time for the disclosure of the nature and scope of any investigation.

I understand that this application is not a contract and that acceptance of employment does not create a contract of employment nor guarantee employment for any specified period of time. If I become employed by Somerset County Library, I will adhere to Somerset County Library's code of ethics and standards of conduct, and I will perform the duties of my position in a strictly ethical and professional manner.

Applicant signature _____ Date _____

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

I represent and warrant that I have read and fully understand the above.

Applicant signature _____

Date _____