

Petoskey District Library 500 E Mitchell St Petoskey MI 49770 Phone 231.758.3100 Fax 231.758.3301

Employment Application

The City of Petoskey and the Petoskey District Library are Equal Opportunity Employers.

				A	pplicant	Information	1				
Full Name:	Last			Ei	rst			1.1.	Date		
	Lasi			FI	rst		IV	1.1.			
Address:	Street Add	ress								Apartment/Unit #	<u>.</u>
	City						S	tate		ZIP Code	
Phone:						Email					
Date Availat	ole:			Desired Sa	lary: <u>\$</u>						
Position App	blied for:										
Are you auth	norized to w	vork in t	he U.S.?		YES NO)					
Have you ev	ver worked	for this	company	YES	s no □	If yes, when	י?				
				fications, licen blement Insert			etc. that yo	u poss	ess that	you believe qua	alify you
					Edu	cation					
High School	:				Address						
Did you	graduate?	YES	NO □	Diploma:							
College:					Address						
Did you	graduate?	YES	NO □	Degree:							
Other:					Address	5.					

Degree:

YES

Did you graduate?

From:

NO □

References

Give names, addresses, phone numbers of those persons who are familiar with your qualifications and character. Do not include former employers or relatives.

Full Name:					
Company:				Phone:	
Address:					
Full Name:					
Company				Phone:	
Addross					
	Previous E	Employmer	nt		
Company:				Phone:	
Address:				Supervisor:	
Job Title:					
Responsibilities:					
From: To					
May we contact your previous superv	isor for a reference?	YES	NO □		
Company:				Phone:	
Job Title:					
From: To	<u>. </u>				
10					
May we contact your previous superv	isor for a reference?	YES			
Company:				Phone:	
Address:				Supervisor:	
Job Title:					
Responsibilities:					
From: To	:	Reason fo	or Leaving:		
May we contact your previous superv	visor for a reference?	YES	NO □		

Disclaimer and Signature

I certify that the information provided on this Employment Application, including any accompanying notes, supplements, cover letters, and/or resumes, is true and complete. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I further understand that if I am hired, I will be employed by the City (Library Department) as an at-will employee, on an indefinite basis (unless my employment is covered by a collective-bargaining agreement or other written agreement to the contrary, signed by me or my authorized representative and the City Manager), and my employment by the City shall be subject to termination, at any time, for any or no reason, with or without prior notice, warning, or disciplinary action.

I agree that any action or suit against the Petoskey District Library or any of its employees relating to or arising out of my employment or the termination of employment, including, but not limited to, claims arising under state or federal civil rights statutes, must be brought within 180 days of the event giving rise to the claim or be forever barred.

Applicant Signature:

Date:

Supplemental Information