Adams Memorial Library
Job Application

Public Services Librarian
Full-time employment

Thank you for your interest in working at the library. So that I may better get to know you, please provide the following when applying.

Applications require:

1. Cover letter
2. Resume
3. Completed application

ADAMS MEMORIAL LIBRARY

212 College St.
Woodbury, TN 37190
Phone: 615-563-5861
Website: www.AdamsMemorialLibrary.org

APPLICATION FOR EMPLOYMENT

APPLICANT INFORMATION				**Date:**	
Last Name:		**First**		**MI**	
Street Address				Apt #	
City		State		ZIP	
Day phone		E-mail Address			
Social Security No.		Desired Salary/Hour:			
Where did you learn about this position?					

Are you at least 16 years of age?	Yes ☐	No ☐	Are you related to a current employee?	Yes ☐	No ☐
Are you a citizen of the United States?	Yes ☐	No ☐	If no, are you authorized to work in the US?	Yes ☐	No ☐
Have you ever worked for Cannon County?	Yes ☐	No ☐	If so, when?		
Have you ever been convicted of a felony or subject to deferred adjudication for a felon?	Yes ☐	No ☐	If yes, explain page 4		

INTERESTS

Position Applied For		*Availability:*	Full Time ☐	Part Time ☐	Temp ☐
Date Available to Begin Employment		*Schedule*	Morning	Afternoon	Evening
		Monday	☐	☐	☐
		Tuesday	☐	☐	☐
		Wednesday	☐	☐	☐
		Thursday	☐	☐	☐
		Friday	☐	☐	☐
		Saturday	☐	☐	☐
		Sunday	☐	☐	☐

Do you have special schedule requirements?	Yes ☐	No ☐	If Yes, please explain:

EDUCATION

School Name		City/State	Field of Study	Dates Attended	GPA	Did You Graduate?	
High School						Yes ☐	No ☐
Vocational School						Yes ☐	No ☐
College/University						Yes ☐	No ☐
Other Education						Yes ☐	No ☐

Check the highest grade completed:	☐ 6	☐ 7	☐ 8	☐ 9	☐ 10	☐ 11	☐ 12	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6+
	Middle School			High School				College					

RELATED SKILLS			
List office equipment with which you are proficient:			
List computer equipment and software with which you are proficient:			
Please describe your knowledge and experience in using a computer.			
It is the requirement of all employees to provide exceptional service to customers—both internal and external. Please provide an example of a situation where you have provided or observed exceptional customer service.			
Do you speak, read, write, or understand any foreign languages?	Yes ☐	No ☐	If so, indicate your fluency:
List any special courses or seminars taken within the last 5 years:			
Other related skills or background:			

LICENSURE/REGISTRATION (Not applicable to the library)				
Type	License Number	Expiration Date	Issued by	City/State
Is your license currently under review, flagged, or has it ever been revoked (if 'yes," please explain on a separate sheet.			Yes ☐	No ☐

EMPLOYMENT HISTORY (INCLUDE ALL POSITIONS).			
Have you ever been employed under a different name? If so, please list all names:			
Most Recent Employer	Address, City, State, ZIP		Job Duties
Office Phone	From: To:	Job Title	
Supervisor's Name	Reason for leaving	Salary	Status Full Time ☐ Part Time ☐ Temp ☐
May we contact your current employer at this time?	Yes ☐	No ☐	
Previous Employer	Address, City, State, ZIP		Job Duties
Office Phone	From: To:	Job Title	
Supervisor's Name	Reason for leaving	Salary	Status: Full Time ☐ Part Time ☐ Temp ☐

Previous Employer	Address, City, State, ZIP		Job Duties
Office Phone	From: To:	Job Title	
Supervisor's Name	Reason for leaving	Salary	Status Full Time ☐ Part Time ☐ Temp ☐

Include additional employers below

MILITARY SERVICE

Branch		From		To	
Rank at Discharge		Type of Discharge			
In other than honorable, explain					

DISCLAIMER AND SIGNATURE

1. I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired. If this application leads to employment, I understand that false or misleading information in my application or interview may result in termination of employment.
2. I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.
3. Further, I release all such parties form all liability from any damages which may result from furnishing such information.
4. I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the county or myself.

Signature		Date	

Please supplement this record with a resume and cover letter.

Thank you for your interest in employment with Adams Memorial Library.

Extra pages for employment and/or felony information follow this page

Optional Sheet for Additional Information

EMPLOYMENT HISTORY (INCLUDE ALL POSITIONS).

Previous Employer	Address, City, State, ZIP		Job Duties
Office Phone	From: To:	Job Title	
Supervisor's Name	Reason for leaving	Salary	Status Full Time ☐ Part Time ☐ Temp ☐

Previous Employer	Address, City, State, ZIP		Job Duties
Office Phone	From: To:	Job Title	
Supervisor's Name	Reason for leaving	Salary	Status Full Time ☐ Part Time ☐ Temp ☐

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Office Phone	From: To:	Job Title	
Supervisor's Name	Reason for leaving	Salary	Status Full Time ☐ Part Time ☐ Temp ☐

FELONY INFORMATION

Additional space for felony conviction or deferred adjudication for a felony charge. Provide: • Dates • Nature of offense • Name and location of the court • Disposition of the cases(s)	