

# Lancaster County Library: Employment Application

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Position Desired _____	Salary Requested _____	Date Available to Work _____
Full Name _____	Date _____	
Address _____	E-mail Address _____	
City, State, Zip _____	Daytime Phone # _____	Evening Phone # _____

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Available to Work: \_\_\_\_\_ Full-time; \_\_\_\_\_ Part-time; \_\_\_\_\_ Days; \_\_\_\_\_ Evenings; \_\_\_\_\_ Saturdays  
(Check all that apply)  
\_\_\_\_\_ Lancaster; \_\_\_\_\_ Kershaw; \_\_\_\_\_ Indian Land.

Are you a U.S. citizen or authorized by INS to work in the U.S. without restriction? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been convicted of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_

Do you have a physical or medical condition which might limit your ability to perform the job applied for?

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, please explain: \_\_\_\_\_

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Education:	School Name & Location	Year	Major/Minor	Degree?
High School:	_____	_____	_____	_____
Trade/Technical:	_____	_____	_____	_____
College/University:	_____	_____	_____	_____
College/University:	_____	_____	_____	_____
Graduate/Other:	_____	_____	_____	_____

Please list any special skills, qualifications & experience you have relevant to the position you are applying for:

\_\_\_\_\_

\_\_\_\_\_

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List two personal references (other than relatives and ministers) who have known you and your work for at least one year:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years known \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years known \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

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**EMPLOYMENT HISTORY (LIST MOST RECENT EMPLOYER FIRST):**

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Date hired \_\_\_\_\_ Starting wage \_\_\_\_\_ Starting position \_\_\_\_\_

Dated ended \_\_\_\_\_ Ending wage \_\_\_\_\_ Ending position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ May we contact? \_\_\_\_\_ Yes \_\_\_\_\_ No

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Date hired \_\_\_\_\_ Starting wage \_\_\_\_\_ Starting position \_\_\_\_\_

Dated ended \_\_\_\_\_ Ending wage \_\_\_\_\_ Ending position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ May we contact? \_\_\_\_\_ Yes \_\_\_\_\_ No

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Date hired \_\_\_\_\_ Starting wage \_\_\_\_\_ Starting position \_\_\_\_\_

Dated ended \_\_\_\_\_ Ending wage \_\_\_\_\_ Ending position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ May we contact? \_\_\_\_\_ Yes \_\_\_\_\_ No

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge and that I have withheld nothing which, if disclosed, would alter the integrity of this application.

I further understand that if I am employed, false statements on this application will be considered sufficient cause for dismissal. This Library is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment in this State is "at will", which means that either I or this Library can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis.

I hereby acknowledge that I have read and understand the above statements.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_