

Knowlton Library

220 North Main Street
Bellefontaine, Ohio 43311-2228
Phone (937) 599-4189 Fax (937) 599-5503
LoganCountyLibraries.org

Application for Library Employment

Personal Information								
Legal Name			Preferred Name					
		0			T =			
Street Address		City	State		ZIP code			
Mailing Address		City	ity State		ZIP code			
Phone Number		Email						
Employment Desired	L							
Position	□ Any □ Library Page □ Patron Services							
Position Department Any Library Page Patron Serv								
Preferred Hours		Date You Can Start Sa		Salary De	Salary Desired			
□ Full-Time □ Part-Time								
Include all locations at which you would be interested in working:								
□ Knowlton (Bellefontaine) □ DeGraff □ Lakeview □ Rushsylvania □ West Liberty □ West Mansfield								
Have you applied to or worked for Lo	Position Held		Years Em	Years Employed				
Libraries in the past? Yes Are your related to an reciding with an								
If yes, Logan County Libraries' policy		-	_	-				
the Board from employment eligibility	•	salate farmly me.	insolo of proof	on omployees (
Education History								
Name and Location of School		ı	Years	Subject(s)	Did You			
Name and Local	1011 01 3011001	'	Attended	Studied	Graduate?			
High School			Atteriaca	Otaulea	Oraduato:			
The second secon								
If a current high school student, v	hat is your grad	de? □ Sophoi	more □ Jui	nior 🗆 Senio	or			
College(s)								
Other								
Additional Information								
Skills or training (computer skills, office experience, etc.)								
Additional language(s) spoken (include fluency level)								
<u> </u>								

Rev: 2024.01.24

Additional Information (Continued)										
List any relevant sch	nool activities, volunteer position	s, community involv	ement or othe	er opportunities						
List any information	you want Logan County Librarie	es to know or consid	der							
Employment	: History (List your previ	ous three [3] em	ployers, beg	ginning with the	most recent)					
Date of Employment (Month & Year)	Name & Address of Employer	Salary	Position	Reason for Leaving	May We Contact?					
From To					□ Yes □ No					
Is the employer listed above your current employer? □ Yes □ No										
To From					□ Yes □ No					
То					□ Yes					
References (Provide two [2] professional and one [1] personal reference. References must not be related to or residing with you. High school students should include at least one [1] teacher.)										
Full Name	Phone Number	E-Mail Addres	S	Relationship	Years Known					
 Authorization (Read each statement carefully before signing.) I CERTIFY that the information provided on this application is true, accurate and complete to the best of my knowledge. I understand that incomplete, false or misleading information on this application or other employer records shall be grounds for denial of employment or immediate termination of employment, regardless of when or how it was discovered. I UNDERSTAND that any offer of employment is contingent on my ability to provide proof that I am legally authorized to work in the United States and to pass a background check. I UNDERSTAND that my employment and compensation is at the will of Logan County Libraries and myself, and thus it may be terminated at any time with or without prior notice, with or without cause, at the option of Logan County Libraries and myself. I CERTIFY that I am over the age of sixteen (16). If under the age of eighteen (18), I CERTIFY that I can obtain the required permit. 										
Signature of applic	ant									
It is with my approval that makes an application for work with the Logan County Libraries.										

Signature of parent/guardian, if applicant is under the age of eighteen (18)

Rev: 2024.01.24

Date