



## Meherrin Regional Library System

133 W. Hicks Street, Lawrenceville, Virginia 23868

Phone: 434-848-6899 Fax: 434-848-6739 www.meherrinlib.org

### GENERAL INFORMATION

Position Title: \_\_\_\_\_

(One per Application)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

(Optional Unless Under 18 Years of Age)

Full Name: \_\_\_\_\_

Last

First

Middle

Address: \_\_\_\_\_

City

State

Zip Code

Home Telephone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Have you previously been employed by the Meherrin Regional Library System? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, Position Held: \_\_\_\_\_ Dates of Employment \_\_\_\_\_

If position requires driving:

Valid Driver's License Number: \_\_\_\_\_ Issuing State \_\_\_\_\_ Expiration Date: \_\_\_\_\_

For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_ No response \_\_\_\_\_

Note: Under the Immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.

Are you willing to accept employment which requires you to travel? Yes \_\_\_\_\_ No \_\_\_\_\_

Please list geographical locations in which you are willing to work:

Lawrenceville, VA \_\_\_\_\_ Emporia, VA \_\_\_\_\_

Are you available weekends, holidays, and varied shifts? Yes \_\_\_\_\_ No \_\_\_\_\_

When will you be available to start work? Date: \_\_\_\_\_

Have you ever been convicted of a misdemeanor; felony; or traffic violations, excluding those before your 18th birthday?

Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please list all dates and explain)

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been dismissed or asked to resign a position in order to avoid dismissal? \_\_\_\_ Yes \_\_\_\_ No

If yes, explain the circumstances: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any relatives currently working for the Library or serving on the Board of Trustees: \_\_\_\_\_  
\_\_\_\_\_

Are you an honorably discharged veteran of the armed forces of the United States: Yes \_\_\_\_ No \_\_\_\_

If yes, are you a veteran who has received an honorable discharge and has a service connected disability rating fixed by the US Department of Veterans Affairs? Yes \_\_\_\_ No \_\_\_\_

**EMPLOYMENT HISTORY**

(Begin with last or most recent paid, military, or voluntary experience. Use

additional sheets as necessary.)

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

May we contact employer: Yes No

Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Position held: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Number of Persons Supervised: \_\_\_\_\_

Name if different from Present: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

May we contact employer: Yes No

Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Position held: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Number of Persons Supervised: \_\_\_\_\_

Name if different from Present: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

May we contact employer: Yes No

Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Position held: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Number of Persons Supervised: \_\_\_\_\_

Name if different from Present: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

## EDUCATION

Do you have a high school diploma?    Yes        No                      Date Received: \_\_\_\_\_  
If no, highest grade completed (1st - 12th)

Name and address of high school attended: \_\_\_\_\_

Do you have a GED?    Yes        No                      Date Received \_\_\_\_\_

Post High School Education:

Name and location of institution	Degree Received	Major/Specialty	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## SKILLS or Additional Information

Use this space for any additional information you think would help us evaluate your application, including training, seminars, language training, workshops, certifications, licenses, achievements or specialized skills.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## REFERENCES

(List three persons not related to you who know your qualifications.)

Name	Address	Telephone	Relationship
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

## CERTIFICATION

I hereby certify that all entries and all attachments are true and complete. I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in the services of the Meherrin Regional Library System. I understand that all information on this application is subject to verification and I consent to references and former employers and educational institutions listed being contacted regarding this application. I further authorize the Library to obtain my criminal history record and check my driving record now and during the course of my employment as the Library may deem necessary. I understand that the Library may be required to provide information concerning my application for employment and my employment history to Federal and State agencies for use in any employment related investigations or inquiries.

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

**Your response below is voluntary and is used to assist us in our compliance with Federal/State equal opportunity record keeping and reporting. Your response will not be used in any way to determine your eligibility for employment.**

Position Title \_\_\_\_\_ Date \_\_\_\_\_  
                    Fulltime        Part-time

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Business Telephone Number \_\_\_\_\_

Check: Male \_\_\_\_\_ Female \_\_\_\_\_ Not Disclosed \_\_\_\_\_ Please indicate your date of birth: \_\_\_\_\_

**Check Race/Ethnic Group(s)**

White \_\_\_\_\_  
Black \_\_\_\_\_  
Hispanic \_\_\_\_\_  
Asian and Asian American \_\_\_\_\_  
American Indian \_\_\_\_\_  
Other \_\_\_\_\_

**Check Highest Level of Education Completed**

Attended High School \_\_\_\_\_  
High School Diploma \_\_\_\_\_  
Attended College \_\_\_\_\_  
Associate Degree \_\_\_\_\_  
Bachelor's Degree \_\_\_\_\_  
Master's Degree \_\_\_\_\_  
PH.D or Professional Degree \_\_\_\_\_

**Check Status**

Military \_\_\_\_\_  
Active Duty \_\_\_\_\_  
Active Reserve \_\_\_\_\_  
National Guard \_\_\_\_\_  
Veteran \_\_\_\_\_  
Not Applicable \_\_\_\_\_

**Check Referral Source(s)**

Newspaper \_\_\_\_\_  
Online Website \_\_\_\_\_  
Library Bulletin Board \_\_\_\_\_  
Friend or Relative \_\_\_\_\_  
Library Website \_\_\_\_\_  
National Publication \_\_\_\_\_  
Other \_\_\_\_\_