

**APPLICATION FOR EMPLOYMENT**

**University City Public Library  
6701 Delmar Boulevard  
University City MO 63130  
314.727.3150**

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street Apt. no. City State Zip

Telephone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Are you a citizen of the United States?: yes \_\_\_ no \_\_\_

**EDUCATION:**

Name and location of High School: \_\_\_\_\_

Did you graduate: yes \_\_\_ no \_\_\_ If still in high school, date of expected graduation: \_\_\_\_\_

Names of Colleges and Universities attended	Semester Hours	Degree	Major Subjects

Business, Correspondence, or other Courses: \_\_\_\_\_

Any other Special Training: \_\_\_\_\_

For what positions or areas of work are you applying:

Shelving: \_\_\_\_\_ Circulation: \_\_\_\_\_ Technical Services: \_\_\_\_\_

Youth Services: \_\_\_\_\_ Professional (MLS required): \_\_\_\_\_

Full time: \_\_\_\_\_ Part time: \_\_\_\_\_  
Number of hours per week

Are you willing to work: Daytime hours: \_\_\_\_\_ Evening hours: \_\_\_\_\_  
Saturdays: \_\_\_\_\_ Sundays: \_\_\_\_\_

Date available for employment: \_\_\_\_\_

(Over)

**EXPERIENCE:**

List below a complete statement of your work history, *listing your most recent employment first.*

Dates of employment	Name and address of employer:	Position held and specific duties	Reason for leaving
From _____ Mo. Year			
To: _____ Mo. Year			
From _____ Mo. Year			
To: _____ Mo. Year			
From _____ Mo. Year			
To: _____ Mo. Year			
From _____ Mo. Year			
To: _____ Mo. Year			

**REFERENCES:**

Name and title:

Address:

Telephone no.

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Additional information that may be relevant to your application:

AUTHORIZATION FOR RELEASE: I hereby authorize the University City Public Library to make such investigations and inquiries as to my character, employment record, education records including transcripts, and conviction record and/or matters as may be deemed necessary in arriving at an employment decision. I hereby release employers, schools, law enforcement agencies and persons from all liability for any damage whatsoever that may ensue from furnishing the same to the University City Public Library.

CERTIFICATE OF APPLICANT: I certify that all answers and statements herein contained are true to the best of my knowledge and belief. I approve the above authorization for release.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER: University City Public Library is proud to be an affirmative action and equal opportunity employer and will continue to recruit, hire, promote, train, and develop into all job levels without regard to race, color, age, sex (including pregnancy, gender identity and sexual orientation), religion, national origin, genetic information or disability. In recognition of the essential rights of all employees and applicants as individuals, it is the policy of the University City Public Library to recruit, hire, train, develop, and promote in all job classifications without discrimination to achieve equality in employment practices. The Library does not discriminate based on race, color, national origin, gender, religion, sexual orientation, age, or disability. It is also the policy of the Library to act affirmatively in those areas where societal discrimination has denied equality of opportunity, particularly where under-representation exists. Special emphasis will be placed upon recruiting qualified minorities, females, veterans, and disabled individuals.