



# APPLICATION FOR EMPLOYMENT

## Eastern Shore Regional Library

31901 Tri-County Way  
Suite 116-B  
Salisbury, MD 21804

### APPLICANT INFORMATION

Date: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Full Name: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State Zip Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Are you a citizen of the United States?  Yes  No If no, are you authorized to work in the U.S.?  Yes  No

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### EDUCATION

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No Diploma: \_\_\_\_\_

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No Diploma: \_\_\_\_\_

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No Diploma: \_\_\_\_\_

Have you ever been convicted of a crime?  Yes  No

If yes, explain conviction(s), nature of offense(s), State(s) where offenses occurred and Sentence(s) imposed by the Court.

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\*\*You will not be denied employment solely because of a convictions record, unless the offense is related to the job for which you have applied.

### QUALIFICATIONS

*Use the space below to summarize additional information describing your experience and qualifications for the position for which you are applying. You may also include any explanations that you feel would be helpful in understanding other issues in your application.*

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### REFERENCES

*Please list three personal/professional references*

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

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

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

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

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

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

## WORK EXPERIENCE

Please list your work experience for the **past five years**, beginning with your most recent job held.

**Employer/Company:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Employed From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Salary:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_ **May we contact?** \_\_\_\_\_

List the duties you performed, skills you used or learned, positions held and promotions:

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**Employer/Company:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Employed From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Salary:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_ **May we contact?** \_\_\_\_\_

List the duties you performed, skills you used or learned, positions held and promotions:

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**Employer/Company:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Employed From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Salary:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_ **May we contact?** \_\_\_\_\_

List the duties you performed, skills you used or learned, positions held and promotions:

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## APPLICATION FORM WAIVER

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal at any time without any previous notice. I hereby give ESRL permission to contact schools, previous employers (unless otherwise indicated), references, and others. I further authorize the company to obtain a copy of my driving record. I hereby release ESRL from any liability as a result of such contacts, inquiries, or records in order to ascertain my qualifications and fitness for employment.

I further understand that my employment with ESRL shall be probationary for a period of six months, and further that at any time during the probationary period or thereafter, my employment relationship with ESRL is terminable "at will" for any reason by either party.

ESRL is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, national origin, age or disability. We assure you that your opportunity for employment with ESRL depends solely on your qualifications.

Appropriate accommodations for individuals with disabilities will be provided upon request. We require eight business days notice prior to the event.

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

### DO NOT WRITE BELOW THIS LINE

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Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments:

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Hire: YES NO Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Start Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Approved by: \_\_\_\_\_