



**Library Experience –List Most Recent Position First**

<b>LIBRARY NAME</b>	<b>PHONE NUMBER</b>
<b>ADDRESS:</b>	<b>CITY, STATE, ZIP</b>
<b>SUPERVISOR NAME:</b>	<b>SUPERVISOR TITLE:</b>
<b>START DATE:</b>	<b>END DATE:</b>
<b>STARTING JOB TITLE:</b>	<b>ENDING JOB TITLE:</b>
<b>STARTING SALARY:</b> <b>Hourly / Annually</b>	<b>ENDING SALARY:</b> <b>Hourly / Annually</b>

<b>Reason for Leaving (be specific):</b>	<b>Type of Position:</b> <ul style="list-style-type: none"> <li>· Full-time</li> <li>· Part-time</li> <li>· Contract/Temporary</li> <li>· Intern</li> </ul>	<b>Hours _____ / week</b> <ul style="list-style-type: none"> <li>· Exempt</li> <li>· Non-exempt</li> </ul>	Number of Employees Supervised: _____  Can this employer be contacted? _____
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Do you hold a professional librarian certificate? \_\_\_\_Yes \_\_\_\_ No If yes, which state? \_\_\_\_\_ Date(s) \_\_\_\_\_

**Professional References**

Name any persons other than relatives who know most about your qualifications and work performance:

Name	Occupation	Email Address	Phone Number	Relationship

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this applications shall be considered sufficient cause for dismissal.

I hereby authorize the Ulysses Philomathic Library to contact references and prior employers to obtain any and all information related to work performance.

I have read the job announcement for the advertised position and know of no reason I cannot perform the tasks as outlined.

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

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For Office Use Only

Application received \_\_\_\_\_

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

Comments

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Please return completed application to:

**Cynthia Mannino, Search Committee Chair c/o Ulysses Philomathic Library PO Box 655, Trumansburg, NY 14886**