Human Resource Department

24 N Center Street Marshalltown, IA 50158 Ph (641) 754-5704 www.ci.marshalltown.ia.us hr@ci.marshalltown.ia.us



THE CITY OF MARSHALLTOWN IS AN EQUAL OPPORTUNITY EMPLOYER

Marshalltown Public Library – Library Assistant I Employment Application

This application is part of the hiring process and is used to compare each candidate using the same information in the same format. Completed employment applications should be submitted electronically to the Library Director at srosenblum@ci.marshalltown.ia.us. Paper applications should be dropped off to the Marshalltown Public Library or mailed to the Library Attn: Sarah Rosenblum, 105 W Boone St, Marshalltown, IA 50158. If completing the online employment application be sure to save the file, and email as an attachment.

First:		Middle:	Last: _			
Current Address	:		City:	State	::Zip:	
Social Security #	¥:	Email:				
Phone numbers: Home:		Cell:	W	/ork:		
How did you he	ear about this position? (Specific	publication, specific web	osite, friend, City employee, e	etc.)		
If you can speak	a language in addition to English	, please list what language	e(s) and your level of fluency:			
Have you been of explain:	convicted of a violation of the la	w other than minor traffic	c offenses? If	you answered yes,	or if you are unsure, pla	eas
Have you ever b	een discharged from a job?	If you answered yes,	please explain the circumstan	ices of the discharge(s):	
Have you ever b	een employed by the City of Mar	shalltown?I	f yes, list dates of employment	t, department, and po	sition(s) held.	
Do you know an	yone who is employed with the C	City of Marshalltown?	If yes, please provide u	s with their name(s)	pelow:	
EDUCATION	N AND TRAINING:					
High School	Name		_City	State	Zip	
	Highest year completed		Did you graduate?	Still Attend	ing?	_
College	Name		City	State	Zip	
	Course of Study		Highest year completed	Did you graduate?		
Technical	Name		_ City	State	Zip	
	Course of Study		Highest year completed	Did you graduate?		
Other	Name		_City	State	Zip	
	Course of Study		Highest year completed	Did you graduate?		

EMPLOYMENT HISTORY - List most recent employer first 1. _____City/State ______Phone _____ Dates Employed ______ Most recent earnings _____ Supervisor ____ Position Title: Job Duties: Reason for leaving: May we contact this employer? City/State Phone Employer__ Dates Employed ______ Most recent earnings _____ Supervisor _____ Position Title: ______ Job Duties: _____ Reason for leaving: May we contact this employer? __City/State ______Phone ____ Employer Dates Employed _____ Most recent earnings _____ Supervisor ____ Position Title: Job Duties: Reason for leaving: May we contact this employer? REFERENCES Please list three references. References should be able to give an accurate account of work performance. Please do not list relatives. Working Relationship Years known _____ Email address, if known _____ Phone ____ 2) Name ______ Working Relationship _____ Years known _____ Email address, if known _____ Phone 3) Name ______ Working Relationship _____ Years known Email address, if known Phone What appeals to you about this position?

Please describe your experience with e readers, tablets a smart phones?

What are your strengths and weaknesse	es?		
AGREEMENT: Before you sign to I have completed this application mys			
I understand and agree that if I am haccount(s) rather than receiving paper	•	n, I will have my paychecks directly deposited into	a checking or savings
	ormation or significant omission	s submitted with this application is true and com s may disqualify me from further consideration fo	
purpose of determining my fitness a liability under any and all possible	and suitability for employment, causes of legal action, any and	nvestigation of my background, personal habits. I hereby release from liability and promise to he all persons or entities who shall furnish any in their or not that individual is specifically listed	old harmless from any nformation or opinions
or employees any information, data,	or opinions they may have reg he source of such information o	City of Marshalltown, its agents, or employees to arding my background, personal habits, character opinions provided to the City of Marshalltown slay information or opinions.	, qualifications, and/or
•	•	possible causes of legal action, the City of Marsh its investigation into my background, personal hal	
applying for employment with the ci	ity, I expressly waive all my leg	oughly investigate my personal background and al rights and causes of action to the extent that the tent) may violate or infringe upon these aforemen	e City of Marshalltown
This release from liability given by apply to any right of action that migh		n, its employees, or agents, and all others as her d/or my personal representatives.	etofore provided, shall
Signature:	Date:		