

Human Resource Department

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THE CITY OF MARSHALLTOWN IS AN EQUAL OPPORTUNITY EMPLOYER

Marshalltown Public Library – Library Page 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 click "submit form" at the top of the application, save the file, and email as an attachment.

First: _____ Middle: _____ Last: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Social Security #: _____ Email: _____

Phone numbers: Home: _____ Cell: _____ Work: _____

How did you hear about this position? (Specific publication, specific website, friend, City employee, etc.)

If you can speak a language in addition to English, please list what language(s) and your level of fluency:

Have you been convicted of a violation of the law other than minor traffic offenses? _____ If you answered yes, or if you are unsure, please explain:

Have you ever been discharged from a job? _____ If you answered yes, please explain the circumstances of the discharge(s):

Have you ever been employed by the City of Marshalltown? _____ If yes, list dates of employment, department, and position(s) held.

Do you know anyone who is employed with the City of Marshalltown? _____ If yes, please provide us with their name(s) below:

EDUCATION AND TRAINING:

High School Name _____ City _____ State _____ Zip _____

Highest year completed _____ Did you graduate? _____ Still Attending? _____

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.

Employer _____ **City/State** _____ **Phone** _____

Dates Employed _____ **Most recent earnings** _____ **Supervisor** _____

Position Title: _____ **Job Duties:** _____

Reason for leaving: _____ **May we contact this employer?** _____

2.

Employer _____ **City/State** _____ **Phone** _____

Dates Employed _____ **Most recent earnings** _____ **Supervisor** _____

Position Title: _____ **Job Duties:** _____

Reason for leaving: _____ **May we contact this employer?** _____

3.

Employer _____ **City/State** _____ **Phone** _____

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.

1) Name _____ 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 _____

Please describe any experience you have had working or volunteering at a library:

Describe your experiences and comfort level communicating over the phone and in person with the public:

Describe your work ethic and provide examples to demonstrate this:

Describe any training or other experiences not previously addressed on this application that you feel might be beneficial to the Marshalltown Public Library:

AGREEMENT: Before you sign this agreement, please read the following carefully:

I have completed this application myself; no one else has completed any part of it for me.

I understand and agree that if I am hired by the City of Marshalltown, I will have my paychecks directly deposited into a checking or savings account(s) rather than receiving paper checks.

The information provided on this application or on any information submitted with this application is true and complete to the best of my knowledge. I agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if later discovered.

In order to permit the City of Marshalltown to make a thorough investigation of my background, personal habits, and character for the purpose of determining my fitness and suitability for employment, I hereby release from liability and promise to hold harmless from any liability under any and all possible causes of legal action, any and all persons or entities who shall furnish any information or opinions regarding my background, personal habits, and/or character, whether or not that individual is specifically listed as a reference on this application.

I hereby authorize any person or entity who may be contacted by the City of Marshalltown, its agents, or employees to release to such agents or employees any information, data, or opinions they may have regarding my background, personal habits, character, qualifications, and/or job performance. I understand that the source of such information or opinions provided to the City of Marshalltown shall be confidential and that the city shall not be required to reveal the content or source of any information or opinions.

I agree to hold harmless and release from liability under any and all possible causes of legal action, the City of Marshalltown, its agents, and its employees, for any statements, acts, or omissions in the course of its investigation into my background, personal habits, and/or character.

I realize that it is necessary for the City of Marshalltown to thoroughly investigate my personal background and qualifications and by applying for employment with the city, I expressly waive all my legal rights and causes of action to the extent that the City of Marshalltown investigation (for purposes of evaluating my suitability for employment) may violate or infringe upon these aforementioned legal rights and causes of action of mine.

This release from liability given by me to the City of Marshalltown, its employees, or agents, and all others as heretofore provided, shall apply to any right of action that might accrue to my self, my heirs, and/or my personal representatives.

Signature: _____ Date: _____