# HALF HOLLOW HILLS COMMUNITY LIBRARY

55 Vanderbilt Parkway
Dix Hills, NY 11746

510 Sweet Hollow Road
Melville, NY 11747

**APPLICATION FOR EMPLOYMENT**

(Please print in ink or type)

(Will be kept on file 6 months from date of application.)

Check one: Full-Time* _____ Part-Time _____ Date _____

*(*Full Time positions require Civil Service application or appointment from applicable CS list.)*

**PERSONAL DATA**

Name _____

Address _____
Street Town Zip Code

Telephone number _____
Home Cell

**EDUCATION**

| School Name & Address | Circle Last Year completed | Did you graduate? | List diploma or degrees |
|---|---|---|---|
| High School | 1 2 3 4 | Yes ☐ No ☐ | |
| College | 1 2 3 4 | Yes ☐ No ☐ | |
| Major course work | | | |
| Graduate work | 1 2 3 4 | Yes ☐ No ☐ | |

Are you eligible to work in the United States? Yes ☐ No ☐

Are you available to work during Library hours? Yes ☐ No ☐
Monday – Friday 9 a.m. – 9 p.m.
Saturday 9 a.m. – 5 p.m. Yes ☐ No ☐
Sunday 12 noon – 5 p.m. Yes ☐ No ☐

Are you able to work at both the Dix Hills and Melville buildings? Yes ☐ No ☐
If not, why? _____

Does your name appear on any current Civil Service lists? Please list titles:

_____

Are you proficient with computers or computer programs? Please explain.

_____

**EXPERIENCE** – *Give present/most recent position first*. *Use additional sheets if necessary*.

May we contact your present/past employer(s)? Yes ☐ No ☐

1. Employer_____Telephone #_____

   Address _____

   Employed from _____ to _____ Full or Part-time _____

   Title _____

   Briefly describe your duties _____

   Reason for leaving _____

   Supervisor & Title _____

2. Employer_____Telephone #_____

   Address _____

   Employed from _____ to _____ Full or Part-time _____

   Title _____

   Briefly describe your duties _____

   Reason for leaving _____

   Supervisor & Title _____

**REFERENCES** (List 3 who can comment on your qualifications, Do not list relatives or friends)

Name Company Telephone

_____

_____

_____

**DECLARATION**: I declare, subject to the penalties of perjury, that the statements made in this application (including any accompanying papers) have been examined by me & to the best of my knowledge and belief are true & correct. I further request & authorize any former/present employer, military records center, police, parole and probation agencies and former school to provide to the Half Hollow Hills Community Library any and all information including, but not limited to, information as to my character, habits, work ability and/or education. In consideration of compliance with this request, I hereby release & discharge said institutions from any claims, liabilities or damages.

_____

Signature of Applicant Date

_____

State former name or any other name(s) by which you were known

**FOR LIBRARY USE ONLY**

Application listed in log _____

Date Initials

Application copied and sent to

Adult Services ☐ Date _____ Children's Services ☐ Date _____ Finance ☐ Date _____

Teen Services ☐ Date _____ Public Services ☐ Date _____

Date Interviewed _____