

Examples of librarian skills:

Organization

Librarians spend much of their time organizing books, movies, reference sheets, CDs, tapes, and magazines. Organizational skills help a librarian maintain the library's catalog, updating it when new items arrive or a patron uses the media. It requires patience, critical thinking, and attention to detail.

Computer literacy

Being able to use library-specific software, search engines, digital encyclopedias and cataloging software is important. Microsoft Word and Excel programs are used daily.

Interpersonal skills

Being able to communicate well and have positive interpersonal relationships with others is important because librarians work with all ages of library users.

Please list your areas of highest proficiency, special skills, or other items that may contribute to your abilities in performing the position being applied for. _____

EMPLOYMENT HISTORY

Start with your present or most recent job. Include military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected statuses.

- 1) Employer _____ Dates Employed: From _____ To _____
Phone No. _____ Hourly Rate/Salary: Start _____ End _____
Address _____ Describe work performed _____

Job Title _____
Reason for leaving _____
- 2) Employer _____ Dates Employed: From _____ To _____
Phone No. _____ Hourly Rate/Salary: Start _____ End _____
Address _____ Describe work performed _____

Job Title _____
Reason for leaving _____
- 3) Employer _____ Dates Employed: From _____ To _____
Phone No. _____ Hourly Rate/Salary: Start _____ End _____
Address _____ Describe work performed _____

Job Title _____
Reason for leaving _____
- 4) Employer _____ Dates Employed: From _____ To _____
Phone No. _____ Hourly Rate/Salary: Start _____ End _____
Address _____ Describe work performed _____

Job Title _____
Reason for leaving _____

REFERENCES

Do not list more than one family reference.

- 1) Name _____ Phone _____
Address _____ City _____ State _____ Zip _____
Relationship _____ Length of relationship _____
- 2) Name _____ Phone _____
Address _____ City _____ State _____ Zip _____
Relationship _____ Length of relationship _____
- 3) Name _____ Phone _____
Address _____ City _____ State _____ Zip _____
Relationship _____ Length of relationship _____

APPLICANT STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand and acknowledge, unless otherwise defined by applicable law, that all employment relationships with the City and employee are "at will," which means an employee may resign at any time with or without notice, and the employer may discharge an employee at any time with our without cause and with our without notice. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such is specifically acknowledged in writing by an authorized executive of this organization. I also understand that if I am employed by the City, false or misleading information provided on my application or discovered during the course of an interview, may result in discharge. I further understand that if employed, I am required to abide by all rules and regulations of the City.

Applicant Signature _____ Date _____

RELEASE OF INFORMATION

To: Any local, state, or federal law enforcement agency, or any past or present employer.

I, _____, address of _____, have applied for employment with the City of Potwin. I am aware that my entire background is to be investigated thoroughly. I hereby authorize and request the release of any and all information you have concerning me. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving such information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

Date of birth ____/____/____ Place of birth _____
CITY, STATE

SSN _____ DL No. _____ DL State _____

City and State of residence for the previous ten (10) year period:

_____	From _____	To _____
_____	From _____	To _____
_____	From _____	To _____
_____	From _____	To _____
_____	From _____	To _____

Given under my hand, this _____ day of _____, 20_____.

Applicant Signature _____ Date _____

Witness Signature _____ Date _____