



**PERSONAL REFERENCES**-Not relatives or former employers. Persons you have known at least one year.

Name	Address	Phone Number

**PERSONAL DATA**

	Yes	No
1. Are you currently working?		
2. Are you prevented from lawfully becoming employed in this country because of VISA or immigrant status?		
3. Are you a veteran of the armed forces?		
4. Are you 18 years of age or older?		
5. Do you have any relatives, other than a spouse, employed Bay County Library? If yes, who?		
6. Have you ever been convicted of a misdemeanor?* If yes, list misdemeanor.		
7. Do you have any felony charges pending against you? If yes, list charge.		
8. Have you ever been convicted of a felony?* If yes, list felony.		
9. Have you ever been fired from a job?		
10 Will you submit to pre-employment drug screening?		
* Felony & misdemeanor convictions are not an automatic disqualifying element in the hiring process.		

I understand that if I have a protected disability that affects my ability to do the job I seek, I may ask the ADA Administrator to make a reasonable accommodation. I must make my request in writing to the ADA Administrator within 182 calendar days after the date I know or reasonably should know of the need for accommodation.

**CERTIFICATIONS**

READ THOROUGHLY BEFORE SIGNING. IF YOU HAVE ANY QUESTIONS, CALL THE LIBRARY AT 989-894-2837 X2225.

**I agree that any action or lawsuit against the employer, arising out of my application, employment or termination of employment, including, but not limited to state or federal civil rights statutes, must be filed within 180 calendar days of the event giving rise to the claim or be forever barred. I waive any limitation periods to the contrary.**

I certify that the information contained in this application, and future information in support of my application, is correct and understand that falsification of this information is grounds for dismissal. I authorize the references I have provided and my former and/or current employer(s) to give you any and all information concerning my previous or current employment and any pertinent information that they may have, personal or otherwise, and release all parties from all liability for any damages, causes of actions, including but not limited to, slander and libel, that may result from the furnishing of information. In consideration of my employment, I agree to conform to the rules and regulations of the employer and agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, and my employment relationship is at will, unless governed by a union contract. I understand that no manager or representative of the employer has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. I authorize the employer to make a check of my records of driving violations and criminal history, if any. I have read, understand, and agree to the terms contained in the certifications listed herein.

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Print Name