



# Daniel Boone Regional Library

Columbia, Callaway County and Southern Boone County Public Libraries • Bookmobile & Outreach

100 W. Broadway, P.O. Box 1267 • Columbia, MO 65205

Phone (573) 443-3161 or 1-800-324-4806 • Fax (573) 499-0191 • TTY (573) 443-6027 • www.dbrl.org

Please complete all sections of this application. This information will be used to determine your eligibility. If you are selected to participate in the interview process, you will be contacted after the posted closing date. *Résumés may be submitted in addition to this application.* DBRL is an equal opportunity employer.

Position(s) applying for \_\_\_\_\_ Date \_\_\_\_\_

## CONTACT INFORMATION

Name \_\_\_\_\_  
Last/First/Middle

Address \_\_\_\_\_  
Street

\_\_\_\_\_  
City/State/ZIP code

Primary phone no. \_\_\_\_\_ Secondary phone no. \_\_\_\_\_

Email address \_\_\_\_\_

## BACKGROUND INFORMATION

Have you ever worked under a different name?  Yes  No

*If yes, list name(s)* \_\_\_\_\_

Are you eligible for employment in the U.S.?  Yes  No

Are you at least 16 years of age?  Yes  No

Do you have a relative either employed by the DBRL System or on the Library Board?  Yes  No

*If yes, state name and relationship* \_\_\_\_\_

Have you ever been employed by the library before?  Yes  No

*If yes, state dates and department(s)* \_\_\_\_\_

Some of our positions require a driver's license. Do you have a valid Missouri driver's license?  Yes  No

Do you have a valid Missouri commercial driver's license?  Yes  No Class \_\_\_\_\_ Endorsements \_\_\_\_\_

Do you prefer  Full-time  Part-time Number of hours desired per week? \_\_\_\_\_

When will you be available to begin work? \_\_\_\_\_

List hours you are available: Weekdays \_\_\_\_\_ Evenings \_\_\_\_\_ Weekends \_\_\_\_\_

How did you learn of this opening?  DBRL employee  DBRL website  DBRL bulletin board

HR office  Newspaper  Other (explain) \_\_\_\_\_



## EDUCATION & SKILLS

### High School/GED

Name and location of school \_\_\_\_\_

Number of years completed \_\_\_\_\_ Graduated degree \_\_\_\_\_

### College

Name and location of school \_\_\_\_\_

Number of years completed \_\_\_\_\_ Graduated degree and major \_\_\_\_\_

### Other

Name and location of school \_\_\_\_\_

Number of years completed \_\_\_\_\_ Graduated degree and major \_\_\_\_\_

Check the boxes below that apply to your current skills.

#### Software

- Word Processing \_\_\_\_\_
- Spreadsheet \_\_\_\_\_
- Presentation \_\_\_\_\_
- Database \_\_\_\_\_

#### Operating Systems

- Microsoft Windows
- Apple OS X
- Unix/Linux

#### Other Skills

- Typing \_\_\_\_\_ wpm
- Familiar with Internet

List other skills/qualifications including customer service \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT HISTORY

Begin with most current position. Please include military service assignments and volunteer activities. Your application will not be considered unless it is filled out completely. You may include an additional employment history page if necessary.

1

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

Nature of business \_\_\_\_\_

Supervisor's name & title \_\_\_\_\_ Phone no. \_\_\_\_\_

Employment dates \_\_\_\_\_ to \_\_\_\_\_  Full-time  Part-time  Volunteer

Job title \_\_\_\_\_

Salary: starting \_\_\_\_\_ leaving \_\_\_\_\_

Duties and responsibilities \_\_\_\_\_  
\_\_\_\_\_

Reason for leaving \_\_\_\_\_

2

Company/Organization \_\_\_\_\_  
Address \_\_\_\_\_  
Nature of business \_\_\_\_\_  
Supervisor's name & title \_\_\_\_\_ Telephone no. \_\_\_\_\_  
Employment dates \_\_\_\_\_ to \_\_\_\_\_  Full-time  Part-time  Volunteer  
Job title \_\_\_\_\_  
Salary: starting \_\_\_\_\_ leaving \_\_\_\_\_  
Duties and responsibilities \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving \_\_\_\_\_

3

Company/Organization \_\_\_\_\_  
Address \_\_\_\_\_  
Nature of business \_\_\_\_\_  
Supervisor's name & title \_\_\_\_\_ Telephone no. \_\_\_\_\_  
Employment dates \_\_\_\_\_ to \_\_\_\_\_  Full-time  Part-time  Volunteer  
Job title \_\_\_\_\_  
Salary: starting \_\_\_\_\_ leaving \_\_\_\_\_  
Duties and responsibilities \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving \_\_\_\_\_

4

Company/Organization \_\_\_\_\_  
Address \_\_\_\_\_  
Nature of business \_\_\_\_\_  
Supervisor's name & title \_\_\_\_\_ Telephone no. \_\_\_\_\_  
Employment dates \_\_\_\_\_ to \_\_\_\_\_  Full-time  Part-time  Volunteer  
Job title \_\_\_\_\_  
Salary: starting \_\_\_\_\_ leaving \_\_\_\_\_  
Duties and responsibilities \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**EMPLOYMENT HISTORY, CONTINUED**

*We may contact the employers listed on the previous page unless you indicate otherwise.*

Do not contact employer number(s) \_\_\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been discharged or forced to resign from any position?  Yes  No

*If yes*, explain (include employer and year) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES**

*List only references who have knowledge of your work-related abilities/skills. Do not include family members or personal friends if possible.*

Name	Relationship	Telephone no.
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_

\_\_\_\_\_

**PLEASE READ CAREFULLY AND SIGN BELOW**

I, the undersigned, state that the information in this application is true and complete. I understand that to falsify information, misrepresent information or make any omission is grounds for refusing to hire me, or for discharge should I be hired. The Daniel Boone Regional Library (DBRL) Board of Trustees is authorized, through its board members, officers, employees and/or agents, to investigate all statements made on this application.

I authorize DBRL to make any investigation of my personal employment history and authorize any current or former employer, person, firm, corporation, school, credit agency, or government agency to provide to the Library any information they have concerning me. In consideration of the Library's review of this application, I release the Library, its board members, officers, employees and agents, as well as all providers of information, from any liability as a result of furnishing, receiving or soliciting this information.

I understand and agree that neither this application nor any offer of employment from DBRL constitutes an employment contract. If an employment relationship is established, I understand that I, or DBRL, may terminate my employment at any time for any reason. For all purposes, I will be an "at-will" employee.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*The Daniel Boone Regional Library does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, veteran status, sexual orientation or other protected status.*

**FOR OFFICE USE ONLY**

Received date \_\_\_\_\_ initials \_\_\_\_\_

Interview date \_\_\_\_\_ initials \_\_\_\_\_

Response date \_\_\_\_\_ initials \_\_\_\_\_