

JACKSON-GEORGE REGIONAL LIBRARY SYSTEM

**3214 Pascagoula Street
Pascagoula, Mississippi 39567
(228)769-3218
(228)497-4531**

An Equal Employment Opportunity/Diverse Action Employer

APPLICATION FOR EMPLOYMENT

Qualified applicants are considered for all positions without regard to age, race, color, sex, religion, national origin, physical limitations not crucial to job performance, or other non-merit factor.

**ALL ITEMS ON THIS APPLICATION FORM
MUST BE ANSWERED IN FULL. DO NOT
ATTACH RESUME OR OTHER DOCUMENT
EXCEPT AS REQUESTED. PLEASE PRINT
OR TYPE.**

General Information

Date of Application: _____

Position Applied For: _____

Referral Source: Advertisement Friend Relative Employment Agency

Other (Specify): _____

Name: _____

Address: _____

Number/Street (or P. O. Box) City State Zip

Home Telephone Number Cell Telephone Number _____

Email Address: _____

Do you have any relatives associated with the Library System? Yes _____ No _____

If yes, please provide association, name and relation to you: _____

Have you submitted an application here before? Yes ___ No ___ If yes, when: _____

Have you been employed here before? Yes ___ No ___ If yes, when: _____

On what date are you available for work? _____

Are you available to work: Full-Time Part-Time Substitute Any

Hours/days you can work: Day Shift Evening Shift Saturdays Any Shift/Any Day

Indicate all library locations where you would accept employment:

All East Central Gautier Lucedale/George County Moss Point Ocean Springs

Pascagoula/Regional Headquarters St. Martin Vancleave

Can you operate a personal computer? Yes _____ No _____

What software are you proficient with? _____

What office and library-related equipment can you operate? _____

Education

Level	Name/Address of School	Course of Study	No. Yrs. Completed	Did You Graduate?	Type Degree/Date
Graduate School				Yes No	
Undergraduate College or University				Yes No	
High School/ G.E.D.					
Other				Yes No	

Memberships: List all current organization/association memberships below:

Professional References (Do not include present or former **immediate** supervisors.)

	Name and Occupation	Address	Phone Number
1.			
2.			

Personal References (Do not include former employers or relatives.)

	Name and Occupation	Address	Phone Number
1.			
2.			

Special Skills and Abilities

What special skills or abilities do you have that might be useful if you are employed by the Library System?

Experience

Resumes are not accepted as a substitute for completion of this section

Start with your present or most recent position and work back. Answer all items for each position, including starting/ending salaries. Account for all periods of unemployment exceeding three (3) months since beginning your professional career.

Unless you indicate otherwise, we WILL contact employers/supervisors identified below for work performance references.

DO NOT CONTACT

Employer: _____

Reason: _____

Employer: _____

Reason: _____

A.

Starting Date	Ending Date	Starting Salary/Year	Ending Salary/Year	Hours per week

Name and complete address of employer: _____

Name, title and phone number of your immediate supervisor: _____

Exact title of your position: _____

Number of employees you supervised: _____

Reason for leaving: _____

Description of duties: _____

B.

Starting Date	Ending Date	Starting Salary/Year	Ending Salary/Year	Hours per week

Name and complete address of employer: _____

Name, title and phone number of your immediate supervisor: _____

Exact title of your position: _____

Number of employees you supervised: _____

Reason for leaving: _____

Description of duties: _____

C.

Starting Date	Ending Date	Starting Salary/Year	Ending Salary/Year	Hours per week

Name and complete address of employer: _____

Name, title and phone number of your immediate supervisor: _____

Exact title of your position: _____

Number of employees you supervised: _____

Reason for leaving: _____

Description of duties: _____

D.

Starting Date	Ending Date	Starting Salary/Year	Ending Salary/Year	Hours per week

Name and complete address of employer: _____

Name, title and phone number of your immediate supervisor: _____

Exact title of your position: _____

Number of employees you supervised: _____

Reason for leaving: _____

Description of duties: _____

Other

ARE YOU A PARTICIPATING OR RETIRED MEMBER OF THE PERS RETIREMENT SYSTEM YES NO

Have you ever been convicted of or forfeited bond for any felony, or are you currently on probation for any felony in a court of law? Yes _____ No _____

(A felony is defined as an offense punishable by imprisonment for a term exceeding one year.)

If yes, give brief details for each offense – provide (1) date, (2) charge, (3) place, (4) court, and (5) action taken. You must disclose any conviction involving a sentence or suspended sentence. However, you may omit: (1) minor traffic violations/fines; (2) any offense committed before your 18th birthday which was finally adjudicated in a youth court; (3) any conviction the record of which has been expunged under Federal or State Law. _____

Essay

The following question **MUST** be answered by all applicants. **BE SUCCINCT.**

What are the major challenge(s) facing public libraries during the coming decade?

Incomplete and/or unsigned applications will be returned to the applicant.

Read and sign below

I certify that all the foregoing statements are complete, true and correct to the best of my knowledge and belief. In consideration of the employment sought, I hereby authorize the Jackson-George Regional Library System to make an investigation and request former employees to furnish any information concerning me, and I release them from any and all liabilities or damages because of furnishing such information.

In the event of employment, I understand that misrepresentation of information given in my application and/or interview may subject me to disqualification for competition for any job or to termination of employment if employed by the Library System. I understand, also, that I am required to abide by all the policies, procedures and standards of conduct of the Jackson-George Regional Library System.

I understand that if I am offered any job position with the JGRLS system that I will be required to undergo a pre-employment drug screening. I also understand that employment is contingent upon passing a pre-employment drug screen.

Signature of Applicant

Date

**Jackson-George Regional Library System
SUPPLEMENTAL APPLICATION
Library Page**

Name of Applicant: _____ Date: _____

IMPORTANT NOTICE TO APPLICANTS: This supplemental application form must be completed and returned along with the 4-page application form by all applicants. Failure to return the application form and supplemental application may disqualify you from consideration for this position.

Verification of all information must be possible

Part 1:

Answer questions 1 through 6 below. These are minimum qualifications for this position. Every question must be answered "YES". If you cannot answer "YES" to these 6 questions, you do not qualify for this position.

1. High School Diploma or GED and 18 years of age.

Yes _____ No _____

2. Must have dependable transportation to and from work.

Yes _____ No _____

3. Must be able to work mornings, evenings, and weekends (Saturday) as scheduled and work up to 16 hours per week.

Yes _____ No _____

4. Must have good communications skills, both orally and written.

Yes _____ No _____

5. Must have good computer skills, and have the ability to learn new computer applications.

Yes _____ No _____

6. Must be able to push carts filled with books, lift boxes of books, bend and stretch to reach high and low shelves while holding books, and other physical tasks as needed.

Yes _____ No _____

Part II: Preferred Qualifications:

1.

1. Prefer candidates that have a JGRLS library card. Do you have a JGRLS Library Card in good standing?

Yes _____ No _____

2. Prefer candidates with previous work experience involving providing goods or services to the public. Do you have previous work experience providing goods or services to the public? (Please list in work experience.)

Yes _____ No _____

End of Questionnaire