



SOMERSET COUNTY LIBRARY SYSTEM OF NEW JERSEY
 One Vogt Drive
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 Bridgewater, New Jersey 08807
 (908) 458-8400 • Fax: (908) 707-8324
 www.sclsnj.org
 Email: jobs@sclibnj.org

Brian K. Auger
 County Library Administrator

PLEASE PRINT CLEARLY

APPLICATION MUST BE COMPLETED IN FULL

Applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department. SCLSNJ is an Equal Opportunity Employer.

Position(s) Applying For: _____ Date of Application: _____

Name (Last, First) _____ Email address (optional) _____

Address _____
 Street City State Zip Code

Telephone # () _____ Alternate Telephone # () _____

Are you a former employee of the Somerset County Library System? Yes No

If "Yes" – Where? _____ When? _____ Position Held _____

Do you have any relatives currently employed by or volunteering with SCLSNJ, including advisory boards and Friends' groups?
 Yes No

If "Yes": Branch _____

Please check all library branch locations at which you are willing to work.

- Bound Brook Manville Peapack-Gladstone Watchung
- Bridgewater Mary Jacobs (Rocky Hill) Somerville
- Hillsborough North Plainfield Warren

Type of employment desired: Full-Time Part-Time

Please indicate ALL times you are AVAILABLE to work.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

Are you currently employed by any other Somerset County Division? Yes No

If yes, Full-time Part-time Which Division: _____

Are you legally eligible for employment in the United States? Yes No

Are you under 18 years of age? (If "Yes" you will be required to submit working papers if offered employment.) Yes No

Are you able to meet the attendance requirements of the position year round as advertised in the job posting? Yes No

Date available to start work _____

Educational Background

	<i>Name & Address</i>	<i>Major</i>	<i>Graduated (yes/no)</i>	<i>Diploma or Degree Earned</i>
High School				
College Undergraduate				
College Undergraduate				
College Graduate				
Other (Specify)				

References

List three business/work references that we may contact for information concerning your qualifications. At least 1 reference should be a current or former supervisor. (School or volunteer references may be acceptable when there is no recent employment history.) *Do not include personal references.*

<i>Name</i>	<i>Address</i>	<i>Phone #</i>	<i>How do you know this person and for how long?</i>

Additional Information

List professional, trade, business, or community organizations and any offices held. Exclude any memberships that would reveal sex, gender, gender identity, race, color, religion, creed, national origin, ancestry, age, disability, sexual orientation, marital status, veterans' status, or any other legally protected status.

<i>Organization</i>	<i>Office(s) Held</i>

Employment

List your employment history for the past 10 years. Start with present or last position and work back. **Please complete in full even if you have attached a resume.**

<i>Name, Address & Phone Number of Employer</i>	<i>From Mo/Yr</i>	<i>To Mo/Yr</i>	<i>Position(s) Held</i>	<i>Supervisor</i>	<i>Reason for Leaving</i>

Skills

- Word Processing (Word, Word Perfect, etc.) Spreadsheet (Excel, Lotus 123, etc.) Data Entry
 - Publishing software (Publisher, Adobe, etc.) Integrated Library System (If yes, please specify _____)
 - Other software skills: _____
- Other skills: _____
-

Special accomplishments, awards, volunteer activities. Do not include information that would reveal sex, race, religion, national origin, age, color, disability, or any other legally protected status.

Other information you would like us to consider. Do not include information that would reveal sex, race, religion, national origin, age, color, disability, or any other legally protected status.

Conditions

I understand that if I am offered and accept employment, I may be legally required to become a member of the NJ Public Employee Retirement System or the Defined Contribution Retirement Program.

By my signature below, I certify that all of the statements contained in this application and/or on my resume and in the information and documents I provided or will provide in support of my application for employment (both orally and in writing), are accurate and true. I understand that if any statement or information is found to be false, it may be grounds for rejection of my application, withdrawal of an offer of employment or termination of employment.

I understand that the completion of this application does not indicate that there are any vacant positions and in no way obligates the Somerset County Library System to hire me.

I understand and agree that any employment that might be offered as a result of this application is for no definite period of time and may be terminated, with or without cause and with or without prior notice, at any time (except as may be limited by a collective bargaining agreement).

I understand that neither the hours of work that may be assigned to me at any time, nor any other act or circumstance, shall constitute a guarantee of employment as to daily hours, weekly hours, straight time or overtime hours.

By my signature below, I authorize the Somerset County Library System to contact and obtain information from all references, current and former employers and/or educational institutions, and otherwise to verify the accuracy of the information contained in this application, on my resume, in any other documents I presented and in my oral statements during the interview process. I hereby release from liability the Somerset County Library System and its employees and representatives for seeking, gathering and using such information and release from liability all other persons, business entities and organizations for providing such information.

I understand that if offered a position with the Somerset County Library System, the offer may be conditional on me submitting to a background check. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of, a background check will result in a failure of the condition and withdrawal of any employment offer or termination of employment if already employed.

By my signature below, I acknowledge and agree that any offer of employment will be made contingent upon confirmation of my references and licensure, if applicable. I also understand that if I am hired I will be required to provide proof of identity and legal work authorization.

The Somerset County Library System is an equal opportunity employer. SCLSNJ complies with Federal and State legislation and SCLSNJ policies prohibiting employment discrimination on the basis of race, sex, gender, gender identity, religion, creed, color, national origin, citizenship status, ancestry, age, marital status, veterans' status, sexual orientation, domestic partnership, civil union partnership, disability, genetic data, criminal history, and any other legally protected status.

Date: ____/____/____

Signature of Applicant: _____

