MANSFIELD
TEXAS

1200 East Broad Street
Mansfield, Texas 76063
Telephone: 817-276-4267

JOB CLASSIFICATION: Adult Services Librarian
DEPARTMENT: Library **SALARY:** $ 47,473
APPLICATIONS CURRENTLY BEING ACCEPTED.

JOB DESCRIPTION:

Under general direction of the City Librarian, performs professional duties assisting with planning, development, organization, maintenance and use of the Library's collections and services.

EXAMPLES OF WORK TO BE PERFORMED:

- Coordinates and develops information, reference/referral, and interlibrary loan services.
- Selects adult materials and online resources and services.
- Plans and facilitates adult programs.
- Conducts liaison with community organizations.
- Creates reading lists, brochures and bibliographies for use by patrons and staff, and provides readers advisory services.
- Assists with decisions about marketing, publicity and web content.
- Performs other tasks and takes on projects as necessary.

REQUIRED KNOWLEDGE, SKILLS AND ABILITIES:

- Ability to work with members of the staff and public and to support the mission of the public library.
- Knowledge of library collection development practices and of methods used in evaluating library collections.
- Knowledge of public library issues and trends.
- Knowledge of principles, practices and operation of public libraries.
- Knowledge of cataloging and classification principles.
- Knowledge of customer service techniques.
- Skill in communicating clearly and effectively by oral and written means.
- Ability to plan, organize, publicize and complete tasks and projects.

DESIRED TRAINING AND EXPERIENCE:

- Master's degree in library studies from a college or university program accredited by the American Library Association, or its equivalent, and 2 years public library experience.

The City of Mansfield is an Equal Opportunity Employer and does not discriminate on the basis of disability.

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APPLICATION FOR EMPLOYMENT

City of Mansfield, Texas
1200 E. Broad Street
Mansfield, Texas 76063
Phone: (817) 276-4267
FAX: (817) 473-7487
www.mansfield-tx.gov

Please print. All information must be legible. Application must be completed in full or will not be considered. Resumes may be attached to completed application. Applicants requiring reasonable accommodation to the application and/or interview process should contact the Human Resources Department for assistance. Equal access to programs, services, and employment is available to all qualified persons. The City of Mansfield is an Equal Opportunity Employer.

Position applied for: _____ **Date:** _____ **Salary Expected:** _____

NAME: _____ _____ _____
(Last) **(First)** **(Middle)**

ADDRESS: _____
(Street) **(City)** **(State)** **(Zip)**

E-MAIL ADDRESS: _____

TELEPHONE: (Home) _____ **(Work)** _____ **(Cell)** _____

Please check all that apply: Do you want Regular Full Time Regular Part Time Temporary Full Time
Temporary Part Time Seasonal (as needed)

How did you learn of this position? Newspaper* Internet* Professional Magazine* Employee Referral
HR Office Employment Agency Texas Workforce Commission (employment office)
*Specify which _____

Do you have a valid Texas Driver's License? No Yes Type of License: Operator CDL Chauffer
License Number: _____ Expiration Date: _____

Does anyone related to you (by blood or marriage) work here or is currently a member of the City Council? Yes No
City Board Commissions? Yes No If yes, list name, their position, and relationship:
_____

Have you ever worked here before? Yes No If yes, give dates and position held: _____
_____

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

Answering "yes" to the following question will not be an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be taken into consideration.

Have you ever plead "guilty" or "no contest" (*nolo contendere*) to, or been convicted of a crime? Yes No
If you answered "yes," please provide the date(s), location, and details: _____

Have you served in the armed forces, armed forces reserve, or national guard of the United States of America? Yes No
If "yes," please complete the following: BRANCH _____ DATE ENTERED _____
DATE OF DISCHARGE _____ RANK AT DISCHARGE _____
LIST DUTIES AND TRAINING _____
_____
ARE YOU CURRENTLY A MEMBER OF THE RESERVES OR NATIONAL GUARD? Yes No

EMPLOYMENT HISTORY

List all periods of employment or volunteer activities. If currently UNEMPLOYED, write "unemployed" in the CURRENT

EMPLOYER block and go to the next block. Start with your current status and work backward. If you need additional space, use a plain sheet of paper using the format below for each additional position. You may attach a resume or other documents. COMPLETE EACH SECTION FULLY.

CURRENT EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ **To** _____

REASON FOR DESIRING CHANGE: _____
STARTING SALARY: $_____ **ENDING SALARY $**_____**MAY WE CONTACT THIS EMPLOYER?** ___

YOUR DUTIES: _____
_____

LAST EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ **To** _____

REASON FOR LEAVING: _____
STARTING SALARY: $_____**ENDING SALARY $**_____**MAY WE CONTACT THIS EMPLOYER?** ___

YOUR DUTIES: _____
_____

NEXT PREVIOUS EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ **To** _____

REASON FOR LEAVING: _____
STARTING SALARY: $_____ **ENDING SALARY $**_____ **MAY WE CONTACT THIS EMPLOYER?** ___

YOUR DUTIES: _____
_____

NEXT PREVIOUS EMPLOYER: _____

BUSINESS ADDRESS: _____ **PHONE NO.** _____

JOB TITLE: _____ **SUPERVISOR'S NAME:** _____

DATES OF EMPLOYMENT: From _____ **To** _____

REASON FOR LEAVING: _____
STARTING SALARY: $_____ **ENDING SALARY $**_____ **MAY WE CONTACT THIS EMPLOYER?** ___

YOUR DUTIES: _____
_____

PLEASE EXPLAIN IN DETAIL ANY TIME LAPSES DUE TO UNEMPLOYMENT OR OTHER REASONS.

LIST LICENSES or CERTIFICATIONS RELATED TO THE JOB FOR WHICH YOU ARE APPLYING.

LIST PROFESSIONAL OR TECHNICAL LICENSES, REGISTRATION, CERTIFICATES, OR MEMBERSHIPS YOU POSSESS.

CHECK ALL SKILLS OR ABILITIES, BELOW, THAT YOU POSSESS THAT RELATE TO THE POSITION FOR WHICH YOU ARE APPLYING.

Typing / Speed _____ WPM Ten-Key Calculator
Computer List programs in which proficient: _____

FOR TRADES JOBS ONLY:

Truck List type(s): _____

Backhoe List type(s): _____

Grader List type(s): _____

Dozer List type(s): _____

Tractor List type(s): _____

Mower List type(s): _____

Other equipment List type(s): _____

EDUCATION

SCHOOL	NAME AND LOCATION	FROM	TO	GRADUATED/COMPLETED
High School				**Diploma GED**
Trade School				**Course of Study** _____ **Certification** _____
College				**Degree obtained** _____ **Major** _____ **Minor** _____
Other				

ACKNOWLEDGEMENT

READ THE FOLLOWING CAREFULLY BEFORE SIGNING

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from employment with the City of Mansfield whenever it is discovered.

I give the City of Mansfield the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the City of Mansfield and its representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

The City of Mansfield does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only six (6) months for the position for which application is made. I acknowledge that this application, once submitted to the City of Mansfield, becomes the property of the City of Mansfield.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the City of Mansfield reserves the same right to terminate my employment during the probationary period at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the City of Mansfield, other that an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is the policy of the City of Mansfield not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant: _____ Date: _____

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Human Resources

1200 E. Broad Street
Mansfield, Texas 76063
817-276-4280

READ CAREFULLY BEFORE SIGNING

Prior to employment, applicants will be investigated as to convictions for prior criminal offenses. A prior conviction will not automatically disqualify an applicant for employment and will be considered only as it relates to the job applied for and as it may assist in determining character traits of the applicant. However, falsification of the application will result in disqualification for employment.

All applicants for full time or regular part-time positions are requested to take a physical examination, INCLUDING DRUG SCREENING.

All job offers are contingent on the successful completion of reference checks, police check, driver's license check (if applicable), and physical exam (if applicable).

All applications become the property of the *City of Mansfield*. Applications will be kept on file six months.

I hereby request and authorize you to render any information regarding my employment, character, qualifications, habits, reputation, credit, medical history, past record of performance, or any other pertinent information to the City of Mansfield. Any information furnished is at my express request and for my benefit.

I hold said representative or agent furnishing aforesaid information harmless, and I do hereby release them from any and all liability for damage of whatsoever nature because of furnishing such information.

I further understand that this information will be "confidential" between the City of Mansfield and all other parties involved.

_____ _____

Signature of Applicant *Date*

Applicant Notification / Release of Information

In connection with my application for employment, I understand that investigative inquiries on my background, in accordance with the Fair Credit Reporting Act and all state and federal laws, are to be made on me, including information as to my personal character, abilities, work habits, mode of living, residency, general reputation, performance, experience, and other qualities pertinent to my qualifications for employment, including reasons for termination of past employment.

I understand that prospective employer and/or First Check may make inquiries, including but not limited to my consumer credit history, education, professional licensing, and criminal history and driving history. Furthermore, I understand that prospective employer and/or First Check may request information from various federal, state and other agencies that maintain records concerning my past driving history, credit history, criminal history, military history, civil and other experiences.

I understand that according to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my perspective employer from a Consumer Reporting Agency. Upon written request, I will be informed whether an investigative consumer report was requested and will be given full information as to the nature and the scope of the investigation, as well as the name of the reporting agency or sources of information.

I authorize without reservation, any party (including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories) contacted by prospective employer and/or First Check to furnish any or all of the above mentioned information. In addition, I hereby release First Check and prospective employer from any and all liability for damages arising from the investigation and disclosure of the requested information. I further release and discharge all liability from all companies, agencies, officials, officers, employees and other persons, who, in good faith provide to prospective employer and/or First Check the above mentioned information as requested, in order to successfully complete a background investigation for my application of employment. I will allow a photocopy of this authorization to be as valid as the original.

Print Full Name: _____

Social Security _____ *Date of Birth _____ / _____ / _____

Current Address _____

City/State/Zip _____

Driver's License # _____ State _____

Prospective Employer _____

Applicants Signature _____

** Notary Signature _____ Printed _____

State _____ County _____ Commission Expires _____

* Date of birth is being requested only for the purpose of identification in obtaining accurate retrieval of records, and will not be used for discriminatory purposes. ** Only when requested

1500 Corporate Circle Ste 13 Southlake TX 76092
817.410.8383 / 888.588.2525 Fax 817.887.1467 / 888.213.9341
www.firstcheck.com support@firstcheck.com

Print Name: _____ Today's Date: _____

Last First Middle Maiden Month Day Year

SUPPLEMENTAL INFORMATION CARD

The information on this card is used for statistical reporting to various regulatory agencies only. It will be detached from your application and will in no way be used in consideration of your application for employment.

Position applying: _____

Race/Sex: Female ☐ Male ☐

A. ☐ American Indian or Alaska Native
B. ☐ Asian
C. ☐ Black or African American
D. ☐ Hispanic or Latino
E. ☐ Native Hawaiian or Other Pacific Islander
F. ☐ Two or more races
G. ☐ White

Birth Date: _____
Month Day Year

How did you learn of this position?

☐ Dallas Morning News
☐ Employee Referral
☐ Fort Worth Star Telegram
☐ HR Office
☐ Mansfield News-Mirror
☐ Professional Magazine*
☐ Texas Workforce Commission
☐ Other * _____

Internet Site	*Specify Which:*
☐ Career Builder	☐ _____
☐ City	☐ _____
☐ Monster	☐ _____
☐ TML	☐ Other *
☐ Other *	

Birthplace: _____ U.S. Citizen ☐ Yes ☐ No

Have you previously worked for the City? No ☐ Yes ☐ If yes, when? _____
Mo. Year to Mo. Year

Department: _____ Position: _____

Under what other names have you been employed? _____