



White County

Library Assistant

Open Until Filled

Application Package

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Contains:

- **Application for Employment ***
- **Background Investigation Consent Form ***
- **Job Description**

****Complete Entirely and Return to Human Resources***

White County Government
1235 Helen Hwy
Cleveland, Georgia 30528

Telephone: (706) 865-2235
Fax: (706) 865-1324

Internet Address: www.whitecounty.net

APPLICATION FOR EMPLOYMENT

Position or Job Title Applied For: _____

• Human Resources Department, White County Administrative Building, 1235 Helen Hwy Cleveland, Georgia •

We consider applicants for all positions without regard to race, color, sex, religion, national origin, age, marital or veteran status, the presence of a disability or any other legally protected status.

Personal Data

Last Name First (given) Middle Other name(s) under which you have been employed

Address: Street Apt # City State Zip Code

E-mail Address

Telephone: _____

Cell

Residence

Social Security Number

WILL YOU ACCEPT: Temporary Work? Part-Time Work? Shift Work? Weekend/Holiday?

What is the minimum salary you will accept for this position? _____

Are you 18 years old or older? _____ Are you eligible to work in the United States either because you are a U. S. citizen or have U.S. government permission to do so? No Yes

NOTE: If offered employment you will be required to provide documentation to verify employment eligibility. Failure to provide the requested documentation may result in a determination that the applicant is ineligible for employment in the United States.

Have you ever worked for us before? No Yes If yes, when and where? _____

Give name, relationship, & department of any relatives currently employed with White County Government _____

Are you able to perform the job duties listed for the position you are applying for without an accommodation?

Yes No If no, what accommodation is needed? _____

If required by this position, do you have a valid driver's license? No Yes

License # _____ Type _____ State _____

Have you had any traffic violations in the past 3 years? No Yes If yes, type of offense and dates: _____

Have you ever been convicted of an offense against the law or are you now under charges for any offense against the law? (Omit non-moving traffic violations and any offense which was finally adjudicated in a Juvenile Court or under a Youth Offender Law).

NO Yes If Yes, give complete details: (Date, Place, Charges, Disposition) _____

NOTE: A conviction will not necessarily bar you from employment. Each conviction will be judged on its own merits with respect to time, circumstances and seriousness.

"We are an Equal Opportunity Employer"

EDUCATION

Do you have a high school diploma or its equivalent (G.E.D./USAFI Certificate)? NO YES

If yes, please list the name and address of the high school or state authority issuing the diploma or certificate.

Please complete the following section for post-secondary education (Technical Schools/Colleges/Universities):

Name of School	City	State	Hours Earned		Major	Degree	Date Received
			Quarter	Semester			

Describe any specialized training, apprenticeship, skills, and extra-curricular activities. Include office equipment, computer skills, foreign language skills, and special honors that may relate to the position for which you are applying.

REFERENCES - Give names, addresses, and telephone numbers of three (3) references who are not related to you and are not previous employers.

1. _____
 Name Phone #

Address: Street Apt # City State Zip Code

2. _____
 Name Phone #

Address: Street Apt # City State Zip Code

3. _____
 Name Phone #

Address: Street Apt # City State Zip Code

Work History

Describe your work history **beginning with your current or most recent job**. Include military and volunteer experience. Failure to give complete information regarding each job held may result in your disqualification. Complete addresses with zip codes and telephone numbers for all employers are necessary. Have you ever been disciplined, fired, or asked to resign from any job? No Yes If yes, why? _____

Company Name: _____ Telephone: _____

Address: _____ Employment Dates:

_____ From _____ to _____

Name of Supervisor: _____ Annual Salary: _____

Position Held: _____ Reason for Leaving: _____

Describe Your Duties: _____

Company Name: _____ Telephone: _____

Address: _____ Employment Dates:

_____ From _____ to _____

Name of Supervisor: _____ Annual Salary: _____

Position Held: _____ Reason for Leaving: _____

Describe Your Duties: _____

Company Name: _____ Telephone: _____

Address: _____ Employment Dates:

_____ From _____ to _____

Name of Supervisor: _____ Annual Salary: _____

Position Held: _____ Reason for Leaving: _____

Describe Your Duties: _____

A resume may be attached only as additional information and will not be accepted in lieu of completing this section.

(Please duplicate this page if needed)

Applicant's Certification and Agreement

Authorization to Release Information

Conditions of Employment

I hereby declare the information provided by me in this application is true and complete, and I understand that misrepresentations, omissions of facts, or falsification of this information are grounds for refusal to hire, or if hired, termination.

I authorize any persons or organizations to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damage which may result from furnishing such information to you.

I authorize you to request, receive, and verify all information given in this application.

If I am employed by the White County Government, I agree to conform to the policies, rules and regulations of the government set forth in the White County Government's Personnel System, employee handbook, policies, and ordinances; and acknowledge that these policies, rules, and regulations may be changed, interpreted, withdrawn, or added to by the employer at any time, at the employer's sole option.

I further acknowledge that if I become employed with White County Government, my employment will be at-will and may be terminated with or without cause at any time by me or by the employer.

If required by White County Government for the position I am applying, I consent to undergo a physical examination, after I have been offered employment, as deemed necessary.

THIS APPLICATION WILL REMAIN ACTIVE FOR SIXTY (60) DAYS ONLY UNLESS RENEWED PERSONALLY BY ME IN WRITING.

May we contact your present employer? No Yes Presently not employed

You must sign the "Authorization to Release Information" form to enable us to contact prior employers, even though we may not contact your present employer.

Date: _____ Signature: _____

****White County Government is a Drug Free Workplace**
Alcohol and Controlled Substance Testing**

As a condition of employment with White County Government , you will be required to submit to an alcohol and controlled substance screening test. In order to be employed by the White County Government, you must successfully pass this screening test. Candidates rejected for failing to pass the required screening will be required to wait at least 12 months before reapplying for employment. Employees must, as a condition of employment, abide by the White County Substance Abuse / Drug Testing Policy. Employees who are indicted for, or convicted of, a controlled substance related violation under state or federal law, or who plead guilty or no contest to such charges must inform their Supervisor or Human Resources in writing within five days of the conviction or plead (this is a requirement of the Drug Free Workplace Act of 1988). **Should you be offered a job with White County Government, your position will be subject to post accident and reasonable suspicion testing. All safety sensitive positions will be subject to random drug and alcohol testing. These requirements are in accordance with the County's Substance Policy.**

By signing this form, you are acknowledging that you consent to such an examination and screening test.

Date: _____ Signature: _____

CONFIDENTIAL

WHITE COUNTY GOVERNMENT
HUMAN RESOURCES DEPARTMENT

It is the policy of the White County Government to ensure equal opportunity in employment and promotion. This policy will be administered without regard to race, religion, color, national origin, marital or veteran status, sex, age, or disability.

For equal employment opportunity (EEO) statistical data, we request *the* following information. All information will be considered strictly private and confidential and will be used for EEO purposes only. This form is not part of the application for employment. **Failure to complete this form will not affect your application for a position.**

Your cooperation is appreciated. If you prefer not to reply, leave this sheet blank.

If you have questions, please contact the Human Resources Department at 706-865-2235.

Position applied for: _____

Male _____ Female _____ Age _____

WITH WHICH ETHNIC GROUP DO YOU MOST IDENTIFY?

1. ___ Black - Not of Hispanic Origins.
2. ___ Caucasian - Includes origins in Europe, *North* Africa, Middle East; not Hispanic or East Indian.
3. ___ Hispanic - Includes origins of Mexican, Puerto Rican, Central American, South American or other Spanish cultures.
4. ___ American Indian/Alaskan Native
5. ___ Asian/Pacific Islander
6. ___ Other

REFERRAL SOURCE:

1. ___ Atlanta Journal
2. ___ Job Line
3. ___ Walk-In
4. ___ Job Posting Board
5. ___ Job Fair
6. ___ Friend or Relative
7. ___ Current Employee
8. ___ State Department of Labor
9. ___ Professional Journal
10. ___ Community Agency
11. ___ Other
12. ___ Employment Agency
13. ___ ACCG Website

White County Government Human Resources

Name Based Criminal History Record Information Consent / Inquiry Form

I hereby give consent for the **White County Sheriff's Office** to conduct an inquiry and receive any Georgia criminal history record information pertaining to me which may be contained in the files of any state or local criminal justice agency in Georgia.

Full Name (print):			
Address:			
Sex	Race	Date of Birth	Social Security Number

This authorization is valid for 90 days from the date of signature.

I, _____ give consent to the above to perform periodic criminal
(Print Name)
 history background checks for the duration of my employment with **White County Government**.

Signature

Date

Internal Use

Date of Inquiry: _____ Time of Inquiry: _____ Operator's Initials: _____

Purpose Code Used: (check one)

<input type="checkbox"/>	Employment E - Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Employment with Mentally Disabled (M) – Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Employment with Elder Care (N) – Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Employment with Children (W) – Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Public Records (P) – Provides <i>Georgia Felony Convictions Only</i>

The inquiry resulted in the following: (check all that apply)

<input type="checkbox"/>	No Georgia CHRI results available.
<input type="checkbox"/>	Georgia CHRI attached / released.

<input type="checkbox"/>	No NCIC / GCIC Warrant results available.
<input type="checkbox"/>	Possible NCIC / GCIC Warrant. Contact Agency listed below.

Wanting Agency Name:	
Agency Telephone:	

Agency Designee Signature and Title

Date

WHITE COUNTY HUMAN RESOURCES DEPARTMENT
AUTHORIZATION TO OBTAIN MOTOR VEHICLE RECORD

I understand that driving a White County vehicle (or my own vehicle, as required) is a requirement of the position I am being considered for and that having and maintaining a satisfactory driving record is a condition of my employment. I hereby authorize the White County Human Resources Department, to obtain any information in my files pertaining to my driving record for the time period indicated below on an annual basis upon hire.

This release is executed with full knowledge and understanding that the information is for official use of the White County Human Resources Department for the purpose of employment or underwriting of insurance and will not be used for any other purpose.

Consent is granted for the White County Human Resources Department to furnish such information as described above to third parties in the course of fulfilling its official responsibilities.

Full Name: _____ Male Female
(Print)

Date of Birth: _____ Driver's License Number: _____ State Where Issued: _____

Driver's License Expiration Date: _____ Request: Three-year _____ Seven-Year _____

Signature: _____ Date: _____

***All applicants applying for positions requiring the operation of a county vehicle (or a personal vehicle, as required) must provide a satisfactory three year driving record upon notification.**

JOB TITLE: Library Assistant II

LIB/1

DEPARTMENT: Library, White County

JOB SUMMARY: This position is responsible for checking books in and out, shelving books, and performing a variety of clerical and customer service duties in support of the circulation desk.

MAJOR DUTIES:

- o Provides services to patrons by checking materials in and out, collecting fines, answering general reference questions, copying materials, placing holds on items, issuing new cards, explaining library policies and procedures, and responding to telephone inquiries.
- o Assists with voter registration.
- o Searches for missing items.
- o Collects payment for lost or damaged materials and overdue fines; issues receipts as requested.
- o Sorts and shelves materials; examines shelves to ensure books are in proper order.
- o Assists patrons with utilizing online reference sources and databases.
- o May perform technical service duties such as entering data to the computer, checking in and processing magazines and newspapers, replacing barcodes, cataloging items, updating interlibrary loan records online, processing new items, and conducting inventory.
- o Prepares holiday and seasonal displays.
- o Contacts patrons regarding overdue books.
- o Places items on reserve list.
- o Serves as interlibrary loan librarian; receives requests and locates materials.
- o Responds to requests for materials from other libraries.
- o Requests materials for patrons from other branches.
- o Provides reference assistance as requested; assists patrons with locating materials.

- o Contacts patrons regarding requested materials on hold.
- o Schedules use of community room; explains policies and procedures to groups using the facility.
- o Mends worn or torn materials.
- o Checks in materials from the book and video drops.
- o May open or close the library.
- o Balances cash drawer.
- o Files registration cards and internet use agreements.
- o Performs general clerical duties such as typing and filing.
- o Performs other related duties as assigned.

KNOWLEDGE REQUIRED BY THE POSITION:

- o Knowledge of the Dewey Decimal cataloging system.
- o Knowledge of library policies and procedures.
- o Knowledge of collections and reference resources possessed by the library.
- o Skill in operating a personal computer, printer, calculator, typewriter, facsimile machine, laminator, and copier.
- o Skill in performing basic mathematical calculations.
- o Skill in dealing with the public.
- o Skill in oral and written communication.

SUPERVISORY CONTROLS: The Library Program Manager assigns work in terms of somewhat general instructions. The supervisor spot-checks completed work for compliance with instructions and established procedures, accuracy, and the nature and propriety of the final results.

GUIDELINES: Guidelines include library policies and procedures. These guidelines are generally clear and specific, but may require some interpretation in application.

COMPLEXITY: The work consists of related duties in providing library services to patrons. Time constraints and the need to deal with the public contribute to the complexity of the work.

SCOPE AND EFFECT: The purpose of this position is to provide library services to patrons. Successful performance contributes to the effective and efficient use of library materials and services.

PERSONAL CONTACTS: Contacts are typically with library patrons and co-workers.

PURPOSE OF CONTACTS: Contacts are typically to give and exchange information and provide services.

PHYSICAL DEMANDS: The work is typically performed while intermittently sitting, standing, walking, bending, crouching, or stooping. The employee lifts light and heavy objects, climbs ladders, and uses equipment requiring a high degree of dexterity.

WORK ENVIRONMENT: The work is typically performed in a library.

SUPERVISORY AND MANAGEMENT RESPONSIBILITY: None.

MINIMUM QUALIFICATIONS:

- o Ability to read, write and perform mathematical calculations at a level commonly associated with the completion of high school or equivalent.
- o Sufficient experience to understand the basic principles relevant to the major duties of the position, usually associated with the completion of an apprenticeship/internship or having had a similar position for one to two years.