

## CITY OF MILFORD HUMAN RESOURCES DEPARTMENT OPEN COMPETITIVE EXAMINATION

TO: All

FROM: Tania R. Barnes, Human Resources Director

SUBJECT: Job Opening

DATE: January 11, 2018

#### NOTICE TO ALL APPLICANTS:

This opening is available to all City employees and the general public.

POSITION: LIBRARY ASSISTANT – Milford Public Library

<u>REQUIREMENT(S):</u> Graduation from high school and at least two (2) years of library work experience or completion of the Library Technical System Program OR any equivalent combination of education, training and work experience.

SCOPE OF EXAMINATION: Written examination (to be held on Friday, February 9, 2018) weighted 40%. Qualified applicants who receive a passing score of at least 75% on the written examination will be invited to participate in an oral exam, weighted 60%. Candidates must receive an overall passing score of at least 75% to be placed on the list for referral.

FILING REQUIREMENTS: Interested candidates must submit a fully completed Application for Employment, a resume, and cover letter to the City of Milford, Human Resources Department, 2<sup>nd</sup> Floor, 70 West River Street, Milford CT 06460 or email same to <a href="mailto:lpisacane@ci.milford.ct.us">lpisacane@ci.milford.ct.us</a>. The official application form may be obtained by visiting <a href="https://www.ci.milford.ct.us">www.ci.milford.ct.us</a>. Click on Services, then Jobs, then Library Assistant. The fillable application form follows the job description. Application materials must be received no later than Friday, January 26, 2018.

SALARY RANGE: The position is a Grade 24 with weekly salary limits as follows:

Minimum	\$735.98
Step 1	762.17
Step 2	788.68
Step 3	
Step 4	
Maximum	

#### LIBRARY ASSISTANT

#### **GENERAL SUMMARY OF DUTIES**

This is work of a semi-professional nature requiring considerable judgment and discretion and involving final responsibility for results produced. Positions in this classification may involve considerable contact with the public and demand skills in a particular area of library service.

#### **ILLUSTRATIVE DUTIES**

<u>General:</u> Utilizes automated library system to manage collections and patron records; files library material; plans and maintains bulletin board and book displays; repairs library materials.

<u>Reference Department</u>: Receives and interprets information requests from patrons directly or by telephone; assists and instructs public; consults reference materials and finds information required; interprets information for patrons; utilizes and helps maintain inter-library loan records.

<u>Children's Department</u>: Works directly with children in reading guidance; from time to time may be in charge of the department; provides information service to children through use of the reference collection. Develops displays and assists with library programs.

<u>Catalog Department</u>: Works under the general supervision of the Assistant Library Director; utilizes copy cataloging and other methods to maintain library collection; maintains acquisition records, including but not limited to expenditures.

<u>Circulation Department</u>: Works directly with public in checking out and returning books; handles patron registration; some ordering of books; oversees work of seasonal staff and volunteers assigned to Circulation; maintains circulation records.

Performs related work as required.

#### REQUIRED KNOWLEDGES, SKILLS AND ABILITIES

Considerable knowledge of books, periodicals and other informational material. Strong customer service and public relations skills.

Ability to interact with public in a courteous and professional manner.

Working knowledge of computers, automated search methods and ability to use the various information access methods available in a contemporary public library with a high degree of proficiency and accuracy.

Good computer skills, knowledge of computerized circulation system, ability to assist public in using personal computers and other internet enabled devices.

Ability to communicate effectively, both orally and in writing.

Ability to understand and follow oral and written instruction.

#### LIBRARY ASSISTANT

#### REQUIRED KNOWLEDGE, SKILL & ABILITIES (cont'd.)

Physical strength and agility which may include the following: assists library customers in their use of the library performing work which is moderately physically demanding; administers the library collection wherever materials may be located including obtaining and replacing books from shelving stacked at various levels of height; walking and standing for extended time periods (two to four hours); and carrying a reasonable amount of library materials between storage area and various locations where they are used within library facilities and property.

#### MINIMUM EDUCATION & EXPERIENCE REQUIRED

Graduation from high school and at least two (2) years of library work experience or completion of the Library Technical System Program OR any equivalent combination of education, training and work experience.

City of Milford, CT Civil Service Commission 11-82 Re-typed 7/2006

Revised: 3/2016

# MF 1639

Human Resources Department City of Milford 70 West River Street Milford, CT 06460 (203) 783-3239

An Equal Opportunity Employer

### APPLICATION FOR EMPLOYMENT

Docition applying for	
Position applying for	
(use title on job announcement)	
(use title on job announcement)	

#### PLEASE TYPE OR PRINT CLEARLY IN BLACK INK.

All blanks must be completed in order for application to be considered.

DO NOT WR	RITE IN THIS SPACE
$\square$ 0	
ЩQ	Rev. by:
$\square$ NO	
☐ Fduc	
☐ Exp	
☐ Not City	EE
Other	

PERSONAL INFORMATION						
Last Name First Name	M.I.	Other names by	which you ha	ve been known	000- Last 6 digits	of Soc. Sec. No.
Present Address:  No. and Street  Mailing address (if different from residence add	City	State	Zip Code	How long at this		Years/Months
Maning dudi 555 (ii dinerent iron residence dud	No. and Stree	t	City	(	State Zip C	Code
Home Telephone	Cellular		Email			
In case of emergency, notify:  Name	Relationship		Tele	ephone Number		
Are you legally eligible for employment in the U  Are you 18 years of age or older?  Yes	_	lo 🗌 If hired, yo	ou will be requi	red to submit proof o	of eligibility to wor	rk in the USA.
Have you previously applied for employment wi Year(s) applied	th the City of Milford	•	•		Yes _	] No 🗌
Have you previously been employed by the City Job Title/Department	of Milford? Yes		· _ ·	plete the following	information: To	
List any relatives or members of your household Name(s)		by the City of Milfo		_ Department		
Do you claim 5 points preference based on activ	ve duty in the U.S. A	rmed Forces? Ye	es No	O Attacl	h copy of DD214.	
Do you claim 10 points veteran's disability prefe	rence? Yes	No	Attach copy	of DD214 & other supp	porting documentation	on.
	GENE	RAIL NFORMA	TION			
What date are you available to begin work? Do you have any commitments to another emplo If yes, specify commitment(s):	yer that might affect	your employment	with the City	of Milford?	Yes	No
Note to Applicant: DO NOT ANSWER THE DESCRIPTION EXPLAINING THE ESSENT						
Is there anything that would prevent you from Yes No	n performing the es	sential functions	of the posit	ion for which you	u have applied	?

PERSONAL INFORMATION								
High school attended:								
Name of School(s)	City/State	Did you graduate?						
		Yes No						
		Yes No No						
Colleges/Universities attended	d:	1						
Name of Educational Institution	City/State	Did you graduate?	Dates at	tended			ipoloma, GED of credits con	
		Yes No No						
		Yes No						
		Yes No No						
		OLOVIMENT LUCTORY						
List balance ALL massant and most on		PLOYMENT HISTORY	LOVATA			KWADDC		
List below ALL present and past er CONSECUTIVELY. Applicants may								m.
Resumes may be required for certa					se addition	iai payes	ii Hecessa	ıy.
Resumes may be required for certain	iiri positioris. Ii applicabic, iric	idde resume with <b>comple</b>	сса аррис	ation.				
Have you ever been discharged or	asked to resign?	es No						
If yes, please explain:								
Employer			FR	OM	T	0	TOTA	L TIME
Address			Month	Year	Month	Year	YEARS	MONTHS
Telephone Number								
Your job title			Hours pe					
Supervisor's Name	Title:		Starting		\$		oer	
Reason for leaving position			Ending S	Salary	\$	ŗ	oer	
Describe Work Performed:								
Number of Employees Supervised	(if applicable)							
Employer			FR	OM	T	0	TOTA	L TIME
Address			Month	Year	Month	Year	YEARS	MONTHS
Telephone Number								
Your job title			Hours pe					
Supervisor's Name	Title:		Starting		\$	r	oer	
Reason for leaving position			Ending S	Salary	\$	ŗ	oer	
Describe Work Performed:								
Number of Employees Supervised	(if applicable)							
Employer			FR	OM	T	0	TOTA	L TIME
Address			Month	Year	Month	Year	YEARS	MONTHS
Telephone Number								
Your job title			Hours pe					
Supervisor's Name Title:		Starting Salary \$		p	per			
Reason for leaving position			Ending Salary \$ per					
Describe Work Performed:								
Number of Employees Supervised	(if applicable)							

EMPLOYMENT HISTORY (contin			_		<b>T0T</b>	
Employer	FR		T	_		L TIME
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Telephone Number	Houren	or wool				
Your job title	Hours po		<u>¢</u>			
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Reason for leaving position  Describe Work Performed:	Ending S	Salary	<u></u>		oer	
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Number of Employees Supervised (if applicable)						
Number of Employees Supervised (if applicable)						
Employer	FR	OM	T	<u> </u>	TOTA	L TIME
Address	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number						
Your job title	Hours pe	er week				
Supervisor's Name Title:	Starting	Salary	\$	r	oer	
Reason for leaving position	Ending S	Salary	\$	r	oer	
Describe Work Performed:						
Number of Employees Supervised (if applicable)						
***ONLY COMPLETE THE SECTIONS BELOW IF THEY ARE RELEVANT	TO THE	POSITION	ON YOU	HAVE A	PPLIED*	**
SPECIAL SKILLS/TRAINING						
Typing speed: words per minute						
Business machines (other than computers) you are able to operate:						
What computer experience do you have? Apple PC						
Your skill level in Word can best be described as:						
Your skill level in Excel can best be described as:						
Your skill level in Outlook can best be described as:						
Your skill level in PowerPoint can best be described as:						
Your skill level in Access can best be described as:						
Your skill level in Acrobat can best be described as:						
Your skill level in Publisher can best be described as:						
Describe any other software and level of skill or any other applicable abilities:						
SPECIAL SKILLS - FIELD						
Light Equipment:						
What best describes your skill level operating a payloader?						
What best describes your skill level operating a backhoe?						
What best describes your skill level operating a small tractor?						
Heavy Equipment:						
What best describes your skill level operating a grader? What best describes your skill level operating a Cat 225 excavator?						
What best describes your skill level operating a Cat 225 excavator?  What best describes your skill level operating a bulldozer?						
, ,						
Snowplowing:  Describe any experience you may have had snowplowing. Include the size of the plow(s) y	ou havo d	rivon nun	nhor of mo	nthelypar	s of snow	nlowing
experience and type of area(s) plowed (roads, driveways, parking lots):	ou nave u	iiveii, iiuii		Titi isi year	3 UI 311UW	piowing
experience and type of area(s) plowed (roads, driveways, parking lots).						

	OTHER TRAINING, SKILLS, AND/OR	LICENSES		
you are applying, such as machines	training, apprenticeship, certifications, licenses, skills, you are able to operate, languages you speak and re special abilities or knowledge. Give name and location	s, special skills and qualifica ead or write well, computer	skills besides those me	nentioned
<u> </u>				
List professional, trade, business or national origin, age, ancestry, disabl	civic activities and offices held: (You may exclude me ility or other protected status.)	embership which would rev	eal gender, race, religi	on,
<ul><li>(1) You must possess a val</li><li>(2) Any special endorsement</li><li>(3) If you are offered employment</li><li>a condition of employment</li></ul>	nts must be current and valid; byment by the City of Milford, and if your driver's l ent to obtain a valid Connecticut Driver's License	ilicense is from another s		quired as
Do you have a valid driver's licen Expiration Date		License #		
	D, UPON NOTIFICATION, TO SUBMIT A COPY ( y Connecticut Department of Motor Vehicles offic			ing
List three professional or busines relationship (i.e., co-worker, super	PROFESSIONAL REFERENC ss references who are not your relatives or emplo ervisor, associate, customer).		rd. State the nature of	
Name	Address	Phone	Relationship	Years Known
	1			
			' <u></u>	<u> </u>

IMPORTANT: Read each of the following sections carefully and completely. If you do not understand any portion of the statements that follow, ask for clarification. Your signature indicates that you have read and understand each of the provisions listed and that you agree to abide by the conditions stated therein.

**NOTICE TO PERSONS WITH DISABILITIES:** Testing arrangements to accommodate persons with disabilities will be made upon request of the applicant. If accommodation is requested, the applicant will be required to state what accommodation is needed.

**PRE-EMPLOYMENT MEDICAL EXAMINATION:** Applicants selected for employment may be required to pass a medical examination given by a physician designated by the City of Milford.

**PROBATIONARY PERIOD:** Employees serve a probationary period as determined by City policy or by any applicable collective bargaining agreement. Termination of employment during the probationary period may be with or without cause and is not subject to any appeal process or grievance procedure of any applicable collective bargaining agreement.

**DRUG POLICY:** It is the policy of the City of Milford to maintain a drug free workplace. Employees who are observed in possession of or using controlled substances (drugs) will be terminated and may have criminal actions filed against them. Employees in certain positions are subject to Federal laws requiring pre-employment, post-accident, and random drug testing.

UPON EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE YOUR SOCIAL SECURITY NUMBER.

#### PRE-EMPLOYMENT STATEMENT

AGREEMENT: I CERTIFY THAT ALL STATEMENTS MADE ON OR IN CONNECTION WITH THIS APPLICATION ARE TRUE, ACCURATE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT INCOMPLETE, FALSE, INACCURATE, OR MISLEADING INFORMATION GIVEN IN MY APPLICATION, INTERVIEW(S) OR DURING THE COURSE OF MY EMPLOYMENT MAY RESULT IN THE REJECTION OF THIS APPLICATION OR WITHDRAWAL OF A JOB OFFER. FURTHER, FALSE INFORMATION PROVIDED, WHETHER WILLINGLY OR ACCIDENTALLY, MAY RESULT IN DISCIPLINE OR IMMEDIATE DISMISSAL IF EMPLOYED, WHENEVER THE OMISSION OR FALSEHOOD IS DISCOVERED.

I UNDERSTAND THAT THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT NOR IS IT A GUARANTEE OR INDICATION OF EMPLOYMENT. I ALSO UNDERSTAND THAT SHOULD I BE GRANTED AN INTERVIEW, THE REPRESENTATIONS THAT MAY BE MADE AT THE INTERVIEW ARE NOT TO BE CONSTRUED AS CREATING ANY OBLIGATION, PROMISE OR CONTRACT ON BEHALF OF THE CITY OF MILFORD. SHOULD I BE EMPLOYED BY THE CITY, IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO ABIDE BY ALL THE RULES, POLICIES AND REGULATIONS OF THE CITY OF MILFORD, AS THEY MAY FROM TIME TO TIME BE IMPLEMENTED OR REVISED. IDENTIFICATION AND VERIFICATION OF ELIGIBILITY TO WORK IN THE UNITED STATES MUST BE SATISFIED FOR EMPLOYMENT.

I FURTHER UNDERSTAND THAT IN CONSIDERATION FOR EMPLOYMENT, AN INVESTIGATIVE BACKGROUND REPORT MAY BE PREPARED AT THE REQUEST OF THE CITY OF MILFORD, WHEREBY INFORMATION MAY BE OBTAINED FROM MY EMPLOYERS (PRESENT OR FORMER), EDUCATIONAL INSTITUTIONS, ALL BRANCHES OF THE U.S. MILITARY SERVICE, AND PUBLIC RECORDS MAINTAINED BY GOVERNMENT AGENCIES OR OTHERS, INCLUDING BUT NOT LIMITED TO CRIMINAL CONVICTION REPORTS, CREDIT REPORTS, ETC. I AUTHORIZE THE CITY OF MILFORD AND ITS DESIGNATED REPRESENTATIVE(S) TO PERFORM THIS INVESTIGATION, AND FURTHER AUTHORIZE PRESENT AND FORMER EMPLOYERS, REFERENCES AND OTHER PERSONS TO PROVIDE INFORMATION FOR THE INVESTIGATION. I ALSO AUTHORIZE THE CITY OF MILFORD TO RECEIVE CRIMINAL CONVICTION RECORDS PERTAINING TO ME, WHICH MAY BE IN THE FILES OF ANY CRIMINAL JUSTICE AGENCY

I UNDERSTAND THAT ACCEPTANCE FOR EMPLOYMENT SHALL DEPEND ON SATISFACTORY REPLIES FROM MY REFERENCES AND OTHER BACKGROUND CHECKS. ANY OFFER OF EMPLOYMENT MAY BE CONTINGENT UPON PASSING A DRUG TEST AND MEDICAL EXAMINATION. I AUTHORIZE MEDICAL PROVIDER(S) TO RELEASE ANY/ALL MEDICAL INFORMATION TO THE CITY PURSUANT TO ITS PRE-EMPLOYMENT PHYSICAL AND DRUG SCREEN PROCEDURES IN ACCORDANCE WITH HIPAA.

RELEASE: I HEREBY RELEASE AND HOLD HARMLESS ANY PERSON, CORPORATION, COMPANY FROM ANY AND ALL POSSIBLE DAMAGES, DIRECT OR CONSEQUENTIAL, IMMEDIATE OR REMOTE, OF ALL FORMS OR TYPES, THAT I MAY SUSTAIN OR ALLEGE TO SUSTAIN BY VIRTUE OF THAT PERSON, CORPORATION, COMPANY OR OTHER ENTITY COMPLYING WITH MY REQUEST TO FULLY AND COMPLETELY COMPLY WITH THE INVESTIGATION, INQUIRY OR INTERESTS OF THE CITY OF MILFORD, TO WHOM I HAVE MADE AN APPLICATION OF EMPLOYMENT AND IS THE BEARER OF THIS AUTHORIZATION.

SIGNATURE of APPLICANT	DATE



### INVITATION TO SELF-IDENTIFY

Position applying for

Position applying for (use the title that appears on the job announcement)

#### **SECTION 1: CANDIDATE INFORMATION**

It is the policy of the City of Milford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, gender, color, religion, creed, national origin, marital or veteran status, sexual orientation, gender identity or expression, disability or any other legally protected status, unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, all applicants are strongly urged to complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Milford with the requested information by checking the appropriate box in Section 4. This information will not affect in any way your employment opportunities. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes.

applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes.				
SECTION 2: GENERAL I	INFORMATION			
Name		Date		
Social Security Number	000	(Last six digits ONLY)		
SECTION 3: STATISTICA	AL INFORMAT	N		
		LEASE ANSWER THE FOLLOWING QUESTION:		
What is your race/ethnic	ity? (Please ma	k the ONE BOX that describes the race/ethnicity category with which you primarily identify.)		
American Indian or Alaska Native Asian  Black or African American Hispanic or Latino Native Hawaiian or Other Pacific Islander White Two or more races  Gender Male	(Not Hispani who maintains trib (Not Hispani including, for exar (Not Hispani All persons of (Not Hispani (Not of Hispani A person wh	Identification or Latino) All persons having origins in any of the original peoples of North and South America (including Central America), and affiliation or community attachment. or Latino) All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent e, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam. or Latino) All persons having origins in any of the black racial groups of Africa. Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race. or Latino) All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands. c or Latino origin.) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa. originarily identifies with two or more of the above race/ethnicity categories.		
SECTION 4: NON-PART	ICIPATION	Please check box if applicable		
I have read the above staten	nent and have ch			
SECTION 5: RECRUITING INFORMATION  How did you hear about this job? (Please check one.)				
Milford Mirror	Job? (Please che	Human Resources or Department Bulletin Board		
Other newspaper (give n	ame).	Community Agency (give name):		
City Website	unioj.	Professional Journal (give name):		
☐ Internet (list site):		Other (please specify):		
City Employee				