



**TWO
RIVERS**
WISCONSIN

Recruitment Announcement

CUSTOMER SERVICE CLERK

Lester Public Library

Part-Time: 12-16 Hours per Week

The Lester Public Library is recruiting for a part-time Customer Service Clerk to work 12-16 hours per week. The ideal candidate will have familiarity with the Dewey Decimal system, ability to move and shelve carts weighting up to 50 pounds and the ability to work weekends and evenings.

Customer service experience and high school diploma required.

Starting wage will be \$9.83 per hour.

Application and complete job description is available at the library circulation desk or online at www.two-rivers.org.

Interested candidates should submit a completed employment application by 12:00 pm on Friday, January 28, 2022, via email to jefdaw@two-rivers.org or by mail to:

Lester Public Library
Attn: Jeff Dawson
1001 Adams St.
Two Rivers, WI 54241-0087

Job Description Customer Service Clerk

Under the supervision of the Customer Service Coordinator, the Customer Service Clerk provides customer service to our patrons across the entire library. Customer Service Clerks are expected to work a flexible schedule including some evenings and weekends.

Essential Duties and Responsibilities:

1. Be the first point of contact for our library patrons, act as the 'face' of the library.
2. Create a welcome environment for patrons of all ages.
3. Work in a polite, respectful and consistent manner with patrons who may have fines, missing items or other library related issues in person and on the telephone.
4. Good interpersonal skills and ability to maintain and foster cooperative and courteous working relationships with the public, peers, and supervisors.
5. Problem analysis and problem-solving in the best interest of both patron and library.
6. Understand the importance of confidentiality for our patrons.
7. Correctly answer directional questions.
8. Be accurate and have an eye for detail.
9. Contribute to a fast-paced technologically innovative environment.
10. Assist patrons with and troubleshoot self-check technology.
11. Shelves materials.
12. Shelf reading duty.
13. Set up new patron accounts.
14. Answering the telephone.
15. Assists with daily pick lists for library system requests.
16. Performs other related work as requested/assigned.

Peripheral Duties

1. Assists with library programs, setting up meeting rooms, and displays.
2. Work independently without supervision.
3. Knowledge of personal computers both in the use of application software and the use of the internet.
4. Willingness to work with new and emerging technologies.
5. Mends repairs and cleans materials as needed.

Minimum Qualifications

1. High School diploma or equivalent
2. Previous experience working in a customer service position.
3. Ability to operate library automation systems and personal computers.
4. Ability to communicate effectively orally, in writing and via email.
5. Ability to work as part of a team.

Tools and Equipment

Library electronic information systems including our online catalog and self-check machines, the internet, personal computers and printers, word processing and spreadsheet software, cash register, calculator, photocopiers and the telephone.

Physical Demands

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is frequently required to walk, sit, talk and hear. The employee is occasionally required to use hands to operate and use objects, tools and controls and to reach with hands and arms. The employee is occasionally required to climb, balance, stoop, kneel, crouch or crawl.

The employee must occasionally lift and or move up to 50 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception and the ability to focus.

Selection Guidelines

Formal application, rating of education and experience, oral interview, reference check and job related tests might be required. The duties listed above are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the position. The job description does not constitute an employment agreement between the employer and employee and is subject to change the employer as the needs of the employer and the requirements of the job change.

**CITY OF TWO RIVERS
APPLICATION FOR EMPLOYMENT**

To Applicants: We appreciate your interest in our organization and assure you that we are sincerely interested in you. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications.

APPLICANT INFORMATION

Last Name	First	Middle	Date of Application
Address			Telephone No. (Include Area Code)
City	State	Zip	Cell Phone No. (Include Area Code)
Are you related to anyone in our employ? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state name and relationship (include in-laws):			
Have you ever been convicted of any felony violation? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe: <i>(Conviction of a crime does not automatically disqualify you from employment)</i>			

Please Provide your E-Mail Address: _____

INSTRUCTIONS:

If you need help to fill out this application form or for any phase of the employment process, please notify the person that gave you this form and every effort will be made to accommodate your needs in a reasonable amount of time.

1. Please thoroughly read all statements contained in this Application form.
2. Complete all pages of this form completely and accurately.
3. Print clearly. **Incomplete or illegible applications will not be processed.**
4. Do not fill out any other attached forms unless and until instructed.
5. You may attach additional sheets to the application to further explain or expand on your answers to the questions.
6. If you wish, you may attach your resume to this **completed** application.

APPLICANT NOTE:

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. False or misleading statements during the interview and on this form are grounds for terminating the application process or, if discovered after employment, terminating employment. This application applies only to the position specified. It is considered inactive after 90 days. If at any time after this point you wish to be considered for employment with the City, another application will have to be completed.

EEO STATEMENT

We are an Equal Employment Opportunity employer, and do not discriminate in our hiring or employment practices. All qualified applicants will receive consideration without regard to race, color, creed, religion, national origin, age, disability, sex, or any other characteristic protected by State or Federal law.

EMPLOYMENT INFORMATION

Position Applied For: Full-Time Part-Time Seasonal (Circle One)	Date you can start	Salary/Hourly Rate desired
Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Would you accept temporary work? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you worked here before? If yes, date/dept
<input type="checkbox"/> Yes <input type="checkbox"/> No Have you received a job description or had the requirements of the job explained to you? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you understand these requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No Can you perform the requirements of this job with or without reasonable accommodations?		

EDUCATION INFORMATION

School	Name of School/City & State	Check No. of Years Completed	List Diploma or Degree	Course of Study
High		1 2 3 4		
College		1 2 3 4		
Other (Specify)		1 2 3 4		

Special Training: _____

Driver's License Number: _____ **State of Registration:** ____ If commercial driver's license is required, list classification held and attach up to ten year employment history, if worked ten or more years. Have you ever been convicted of driving under the influence of alcohol or controlled substances? Yes No. If yes, provide date, where arrested, and under what circumstances. _____

EMPLOYMENT WORK HISTORY

(List Employers for the Past Ten Years - Last or Present Employer, First – Attach Additional Sheets if Necessary)

Name of Employer	Present		2.		3.	
Address						
Telephone						
Employment Dates	From	To	From	To	From	To
Salary	Start	Finish	Start	Finish	Start	Finish
Exact Title of Your Position						
Name/Title of Immediate Supervisor Immediate Supervisor						
Describe Your Duties						
Reason for Leaving						

REFERENCES
(Do Not Include Relatives)

Name & Occupation	Address/Phone	Years Known/Relationship

APPLICANT'S CERTIFICATION AND AUTHORIZATION

CERTIFICATION

I certify the answers given by me to the foregoing questions and any statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentations of facts regarding information called for in this application may result in rejection of my application, or discharge at any time during my employment. I also agree that, if City policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment. I understand that if I am hired, my employment shall be "at-will," and that either the City or I can choose to terminate the employment relationship for any reason, or no reason at all, with or without notice.

AUTHORIZATION

I understand that background, drug, or medical testing may be conducted on me as part of the process to determine my fitness for employment, and hereby agree to submit to such testing. I authorize all persons, schools, companies, medical practitioners, current and/or former employers, and law enforcement authorities to release any information concerning my background or test results, and hereby release any said persons, schools, companies, medical practitioners, current and/or former employers, and law enforcement authorities from any liability for any damage whatsoever for issuing this information.

Applicants' Full Name _____
(PLEASE PRINT)

Signed

Dated

EMPLOYMENT DATA RECORD

Employees are treated during employment without regard to race, color religion, sex, national origin, marital or veteran status, medical condition or handicap, or any other legally protected status.

As an employer with an Affirmative Action Program, we comply with government regulations, including Affirmative Action responsibilities where they apply.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Data Records are kept in a Confidential File and are not a part of your Application for Employment or personnel file.

PLEASE NOTE: YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.

VOLUNTARY SURVEY

(Please print)

Date: _____

Government agencies at times require periodic reports on the sex, ethnicity, handicap, veteran, and other protected status of employees. This data is for statistical analysis with respect to the success of the Affirmative Action program. **SUBMISSION OF THIS INFORMATION IS VOLUNTARY.**

Name		
Address		
City	State	Zip

Complete Only The Sections Below That Have Been Checked:

X	Current Job
X	(Check One) Male Female
X	Check one of the following: (Ethnic Origin) <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Asian/Pacific Islander
X	Check if any of the following are applicable <input type="checkbox"/> Vietnam Era Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Handicapped Individual
X	Birthdate

FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For Is Open ___ Yes ___ No

Position(s) Considered For: _____

Other: _____