

### **Part-Time Page– White Branch Library**

Onondaga County Public Library is seeking a part-time Page to work at the White Branch Library. The successful candidate will help fulfill the branch's need to meet the demands of the public for requested items such as books, media, and miscellaneous items. The selected Page will help shelve books, pull books requested by patrons and other libraries, and assist staff with library projects.

White Branch Library, one of eight branches in the city of Syracuse, is located in the Northside neighborhood on Butternut Street.

#### **Responsibilities:**

- Projects a positive and pleasant attitude to the public and cooperates and maintains an effective relationship with other staff members as part of a team
- Shelves library materials
- Locates requested items
- Puts books in order on shelves
- Adheres to library policies and procedures
- Performs other tasks as requested including staffing the circulation desk

#### **Qualifications:**

- An awareness of the purposes and functions of the public library and the ability to learn library procedures. Good computer skills are a necessity.

#### **Physical Qualifications:**

- Lift up to 15 lbs. of books and move boxed or bagged books up and down stairs
- Standing at the circulation desk sometimes for long periods
- Bend and stretch to reach high and low shelves

#### **Availability:**

- Must be available to work up to 17 hours per week

#### **Pay Rate:**

- \$15.00 per hour

**To Apply:** Fill out and submit the application below by February 19<sup>th</sup>, 2024 to Jaclyn Bleich at [JBleich@onlib.org](mailto:JBleich@onlib.org).  
Or mail to White Branch Library, 763 Butternut Street, Syracuse, NY 13208, attn. Jaclyn Bleich

White Branch Library located at 763 Butternut Street, Syracuse, NY 13208

Phone 315-435-3519 Fax 315-435-8533 [www.onlib.org](http://www.onlib.org)

Dawn Marmor, Executive Director

Beauchamp Branch \* Betts Branch \* Hazard Branch \* Mundy Branch Paine Branch \*

Petit Branch \* Soule Branch \* White Branch

**ONONDAGA COUNTY APPLICATION FOR OPEN COMPETITIVE EXAMINATION Form P-200 rev 09/2019**

MAIL OR DELIVER TO: Onondaga County Department of Personnel, 421 Montgomery Street, 13th Floor, Syracuse NY 13202-2959 Phone (315) 435-3537  
❖www.ongov.net

Job / Exam Title

TYPE OR PRINT CLEARLY IN INK

Exam #

**NAME AND ADDRESS:** IMMEDIATE notice should be given to this office if any changes in name or address occur.

Last Name	First Name	Middle	Social Security #
<b>Legal Address:</b>			<b>Mailing Address (If different from legal):</b>
Street			Street or PO Box
Apt/Rd#			City/Village
City/Village			State ZIP
Town			<b>E-Mail Address</b>
School District			<b>Home Phone</b> ( )
County			<b>Work Phone</b> ( )
State	ZIP		<b>Cell Phone</b> ( )

**ADDITIONAL INFORMATION**

1. If you were ever dismissed or resigned in lieu of dismissal from any public (government) employment due to disciplinary reasons, explain below.
2. If you need special exam arrangements (religious accommodation or disabled), indicate accommodations needed below.

**Use This Space For Explanations**

**VETERAN'S CREDIT:** ☐ Veteran ☐ Disabled Veteran ☐ Currently On Active Duty

Documentation of your veteran status (i.e. discharge papers) should be attached to your application or mailed to this department prior to the eligible list establishment date. Current active duty military personnel must provide proof of active military status at time of application to receive conditional credit.

Since January 1, 1951, have you used additional credits as a disabled/non-disabled veteran for appointment to any position in the public employment of New York State or any of its civil divisions? ☐ YES ☐ NO

**COMPLETE FOR LAW ENFORCEMENT, CORRECTION, CUSTODY, FIREFIGHTER**

1. Are you a citizen of the United States? ☐ YES ☐ NO
2. Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_
3. Law enforcement, Correction and Custody positions: You must complete form P-202 and attach it to your application.

**Payment Enclosed:** ☐ Check # ☐ Cash ☐ Money Order ☐ Visa ☐ MC ☐ Discover ☐ Waived (proof must be attached)

**DECLARATION** (this affirmation *must be signed and dated*) I understand that false statements made herein are punishable as a Class A Misdemeanor, pursuant to section 210.45 of the Penal Law of the State of New York. I declare that, subject to the penalties of perjury, any statements made on this application and any attachments are the truth and to the best of my knowledge correct.

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PERSONNEL DEPARTMENT USE ONLY:** Reviewer \_\_\_\_\_ Date \_\_\_\_\_ Approved ☐ Disapproved ☐

Comments: \_\_\_\_\_  
\_\_\_\_\_ Recv'd By \_\_\_\_\_

Name \_\_\_\_\_

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Education: If more space is needed, attach additional sheets.	Years Completed	Graduated yes /no	Major Course of Studies	College Credits Received	Type of Degree Receive	Date Degree Received
Name of High School or Equivalency			XXXXXXXX XXXXXXXX	XXXXX XXX	XXXXX XXXXX	XXXXXX XXXXXX
Name of College, University, Professional or Technical School						
Name of Other Schools or Special Courses						

**License** Do you possess a license to practice a trade or profession? YES ☐ NO ☐ License/certificate# \_\_\_\_\_

Name of trade or profession \_\_\_\_\_ Licensing Agency \_\_\_\_\_

City/State \_\_\_\_\_ Original Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

**Driver's License** (Complete only if the position for which you are applying requires one.) Number \_\_\_\_\_

Date of Expiration \_\_\_\_\_ Class of license \_\_\_\_\_ Endorsements \_\_\_\_\_ Restrictions \_\_\_\_\_

**School Bus Driver candidates: Date of Birth:** \_\_\_\_\_

**Experience:** You must complete this section whether or not you submit a resume. **Describe any employment, volunteer experience or military service that qualifies you for the position sought.** Duties: Describe the nature of the work with estimated % of time on each type of work. If more space is needed, attach additional sheets. **All statements are subject to verification.**

Length of Employment From Mo. Yr.	Firm Name	Address	City and State
To: Mo. Yr.	Type of Business	Your Title	Name / Title of Supervisor
Total Yrs. Mos.	DUTIES: See directions above		
Hours per week			
Reason for Leaving			
Length of Employment From Mo. Yr.	Firm Name	Address	City and State
To: Mo. Yr.	Type of Business	Your Title	Name / Title of Supervisor
Total Yrs Mos.	DUTIES: See directions above		
Hours per week			
Reason for Leaving			
Length of Employment From Mo. Yr.	Firm Name	Address	City and State
To: Mo. Yr.	Type of Business	Your Title	Name / Title of Supervisor
Total Yrs. Mos.	DUTIES: See directions above.		
Hours per week			
Reason for Leaving			

**ONONDAGA COUNTY DEPARTMENT OF PERSONNEL  
EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE**

The following information is voluntary and will be maintained confidentially.

**SOCIAL SECURITY #:** \_\_\_\_\_

**EXAM TITLE:** \_\_\_\_\_

**EXAM DATE:** \_\_\_\_\_

**MALE** ☐

**FEMALE** ☐

☐ **White/Non-Hispanic**

☐ **Black**

☐ **Hispanic**

☐ **Asian/Pacific Islander**

☐ **American Indian/Alaskan Native**

Onondaga County does not discriminate because of race, creed, color, citizenship, national origin, age, sex, religion, marital status, conviction record, disability, genetic predisposition or carrier status, pregnancy, or sexual orientation. Onondaga County's programs are accessible to all as required by 45FR84.22B. If you have a disability for which you wish accommodation in visiting a county office or in receiving county services, please contact the head of the respective department or his/her representative to make arrangements. Onondaga County's Equal Employment Program and compliance with the Vocational Rehabilitation Act (Section 504) is coordinated by the County Personnel Department. NOTE: Federal law requires employers to hire only U.S. citizens or aliens with the authorization to work in the U.S. Federal Law also requires that at the time of appointment, you provide to the employer certain information, including date of birth, country of origin, right to work in the U.S., and to provide for review certain documents establishing your identity and work authorization, such as birth certificate, etc.