



### APPLICATION FOR EMPLOYMENT

**POSITION:** Library Substitute

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

**PERSONAL INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_

Have you read and understood the job description for Library Assistants (see attached)? [ ] Y or [ ] N

Do you have any physical limitations which would require special accommodations to enable you to carry out essential functions of the position as given in the job description? [ ] Y or [ ] N

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PERSONAL REFERENCES:** Please give two references, other than relatives.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Position: \_\_\_\_\_

Company: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

**SCHEDULE**

Library Substitutes are considered a part-time, on call position. You will be contacted if one of our employees cannot come in to work to fill in for that position. We also have 5 branches that you can be contacted by if you would like more opportunities to work. Please select any preferred library locations you are willing to work for and indicate your available schedule.

**Preferred Location(s):**

- Graham County Public Library
- Moss Memorial Library
- Andrews Public Library
- Murphy Public Library
- Bookmobile

**Available Schedule:**

*Monday:* \_\_\_\_\_

*Tuesday:* \_\_\_\_\_

*Wednesday:* \_\_\_\_\_

*Thursday:* \_\_\_\_\_

*Friday:* \_\_\_\_\_

*Saturday:* \_\_\_\_\_

## EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	DEGREE/DIPLOMA
High School				
College/University				
Vocational/Other School				

## WORK EXPERIENCE

Please list your previous work experience, beginning with your most recent job held. Attach additional sheets if necessary.

Name of Employer:	_____	Employment Dates:	_____
Address:	_____		_____
City, State, Zip:	_____	Position Held:	_____
Phone:	_____	May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	_____		
List duties performed, and skills used or learned:	_____		

Name of Employer:	_____	Employment Dates:	_____
Address:	_____		_____
City, State, Zip:	_____	Position Held:	_____
Phone:	_____	May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	_____		
List duties performed, and skills used or learned:	_____		

Name of Employer:	_____	Employment Dates:	_____
Address:	_____		_____
City, State, Zip:	_____	Position Held:	_____
Phone:	_____	May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	_____		
List duties performed, and skills used or learned:	_____		

Use the space below to highlight any additional experience, skills, knowledge, and personal attributes you feel make you uniquely suited to this position:

*I hereby certify that the information given by me is true and correct to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_