



APPLICATION FOR EMPLOYMENT

Position: Library Assistant

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

The Library Assistant will work a set schedule to be modified as needed .

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	DEGREE/DIPLOMA (or years completed)
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: _____

Position Held: _____

City, State, Zip: Phone: _____

May we contact this

Reason for Leaving: _____

employer? Yes No

List duties performed, and skills used or learned: _____

Name of Employer: _____

Employment Dates: _____

Address: _____

Position Held: _____

City, State, Zip: Phone: _____

May we contact this

Reason for Leaving: _____

employer? Yes No

List duties performed, and skills used or learned: _____

Name of Employer: _____

Employment Dates: _____

Address: _____

Position Held: _____

City, State, Zip: Phone: _____

May we contact this

Reason for Leaving: _____

employer? Yes No

List duties performed, and skills used or learned: _____

Use the space below to highlight any additional experience, skills, knowledge, and personal attributes that 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: _____