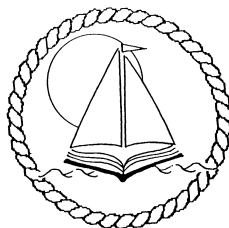


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Harbor-Topky

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Memorial Library

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APPLICATION FOR EMPLOYMENT

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*Important: Complete all sections. Please print legibly in ink.*

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**PERSONAL INFORMATION**

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Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Home Cell Work

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**GENERAL INFORMATION**

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Position you are applying for: \_\_\_\_\_

Can you work evenings and Saturdays?  Yes  No

Are you interested in  Full Time  Part Time  Temporary

Under 18?  Yes  No If under 18, can you provide proof of eligibility to work?

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**REFERENCES**

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References, other than previous employers or relatives. Providing this information means that you give us permission to contact the references listed.

\*Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

\*Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

\*Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

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**PREVIOUS EMPLOYMENT** Please start with most recent position first

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Place of Employment	Duties
Address	Reason for Leaving
Supervisor's Name	Date of Employment From To
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rate of Pay

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Place of Employment	Duties
Address	Reason for Leaving
Supervisor's Name	Date of Employment From To
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rate of Pay

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Place of Employment	Duties
Address	Reason for Leaving
Supervisor's Name	Date of Employment From To
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rate of Pay

Please note any volunteer work which may compliment your paid work experience or relate to the position applied for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional information to describe your qualifications: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**EDUCATION**

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TRAINING	HIGHEST YEAR COMPLETED	NAME AND CITY	DID YOU GRADUATE? (circle one)	MAJOR SUBJECTS OR TYPES OF COURSES
High School	Years 9 10 11 12		Yes No	
Business or Trade	No. of Months		Yes No	
College or University	Years 1 2 3 4		Yes No	
Graduate School	Years 1 2 3 4		Yes No	
Other				

SPECIAL SKILLS (Include knowledge of office equipment, audio visual equipment, word processing, social media, etc.)

Read the following carefully:

I certify that the information provided in this application is complete and true to the best of my knowledge. Should I be employed by the Library, any misrepresentations or false statements given on the application or in the interview(s) may be considered cause for immediate dismissal.

The Library has my permission to obtain all necessary information from the references that I have listed or any other sources concerning my education credentials, prior employment, or personal history. I release all parties from liability in responding to inquiries in connection with my application.

This employment application does not seek information regarding the applicant's criminal record. However, the Library will inquire into the applicant's criminal record via a BCI/FBI background check. In evaluating an applicant's record, the Library shall make an individualized assessment, using factors permitted by applicable law.

I understand this application does not constitute an employment contract of any kind.

If you are hired, this employment application will become part of your official employment record.

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