

APPLICATION FOR EMPLOYMENT

Please type or print. An attached resume will not be considered as having provided the requested information. Incomplete application(s) will not be considered.

oday's Date:	_	PERSO	NAL		
Name:					
Last	First	Mi	iddle	E-mail Address	
Present Street Address:					
Address	City	State Zip		Telephone Number	
Permanent (Or Mailing	Address):				
Address	City	State	Zip	Daytime Telephone Number	
Position Applied for:					
Availability:Full-time	ePart	-Time _	Regi	gular basisTemporary Basis	
Employment with Graft	on-Midview Publi	ic Library ir	ivolves irre	egular shifts, nights and weekends.	
Are you able to make ar	rangements to acc	commodate	irregular w	vork hours?YesNo	
Are you a U.S. Citizen?	Yes	N	No		
If No, are you entitled to and Control Act of 1986			-	quirements of the Immigration Reform	
Date available for work	:				

EDUCATION

Name and Location	Major Course of Study	Total years	Diploma or Degree
High School:			
College:			
Graduate School:			
Other:			
Are you now attending school? YesNoFull-timePart-time If applying for a Page position, are you at least 16 years of age?YesNo List other special training related to the position y certificates:	What courses are you ta		es and/or
I learned of this position vacancy from the follo	owing source:		
Job posting in Grafton-Midview Public Lib	orary facility		
Ad in newspaper			
Online Web posting (please specify website	e)		

EMPLOYMENT HISTORY

Beginning with your most recent employer, please list your last three employers.

Name of Employer		Date
Address		From
City-State-Zip		To
Telephone	Hours Worked/Week	Salary
Job Title and Description of	Responsibilities and Duties:	
Reason for Leaving:		
May we contact this employ	er for Reference?Yes; Supervisor	's Name
No; Explain		
Name of Employer		
Address		From
City-State-Zip		То
Talambana	TT	G 1
Job Title and Description of	Hours Worked/Week Responsibilities and Duties:	Salary
Job Title and Description of Reason for Leaving: May we contact this employ	Responsibilities and Duties: ver for Reference?Yes; Superviso	r's Name
Job Title and Description of Reason for Leaving: May we contact this employ No; Explain	Responsibilities and Duties: ver for Reference?Yes; Superviso	r's Name
Job Title and Description of Reason for Leaving: May we contact this employ No; Explain	Responsibilities and Duties: yer for Reference?Yes; Superviso	r's Name
Job Title and Description of Reason for Leaving: May we contact this employ No; Explain Name of Employer Address	Responsibilities and Duties: ver for Reference?Yes; Superviso	r's Name Date
Job Title and Description of Reason for Leaving: May we contact this employ No; Explain Name of Employer Address City-State-Zip	Responsibilities and Duties: yer for Reference?Yes; Superviso	r's Name
Job Title and Description of Reason for Leaving: May we contact this employ No; Explain Name of Employer Address City-State-Zip Telephone	Responsibilities and Duties: ver for Reference?Yes; Superviso	r's Name
Job Title and Description of Reason for Leaving: May we contact this employ No; Explain Name of Employer Address City-State-Zip Telephone	Responsibilities and Duties: yer for Reference?Yes; Superviso Hours Worked/Week	r's Name
Job Title and Description of Reason for Leaving: May we contact this employ No; Explain Name of Employer Address City-State-Zip Telephone Job Title and Description of Reason for Leaving:	Responsibilities and Duties: yer for Reference?Yes; Superviso Hours Worked/Week	r's Name

REFERENCES

Give the name and address of three (3) references who know your experience, scholarship or ability. Under *relationship*, please specify in what capacity this person knows you.

Name	Address	Phone	Occupation	Relationship

APPLICANT'S STATEMENT:

I certify that the answers given herein are true and complete to the best of my knowledge, and understand and agree that any misrepresentation or omission on my application or related papers, or made during any oral interviews, may result in refusal of employment or shall be considered grounds for dismissal.

I authorize Grafton-Midview Public Library (its officers, agents, representatives or duly authorized employee) to investigate, without liability, all statements contained in this application and supporting materials. If separated from employment from Grafton-Midview Public Library for any reason, I authorize it to furnish any information to persons seeking my employment references and release from liability it and/or any person giving or receiving any such information.

I understand that this application is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. If employed, I will be required to furnish proof of eligibility to work in the United States I understand also that I am required to abide by all rules and regulations of Grafton-Midview Public Library. I understand that the first NINETY DAYS of regular employment represents a provisional period, during which I may be terminated without right of appeal. I have read all of the information and understand as indicated by my signature below.

Applicant Signature:	Date:
Applicant Signature.	Date.