

Application for Employment

The Limestone Township Library District is an Equal Opportunity Employer

Please complete all required fields or indicate "not applicable" (N/A)."

Personal Information			
Full Name:	Application Date:		
Street Address:	City:		
State:	Zip Code:		
Primary Phone: ()	Email Address:		
Background Information			
Position Applying for:	Date Available:		
How were you referred to the library? ()	Advertisement () Library Website () Friend () Relative () Other		
If "Other", please specify:			
Are you at least 18 years of age? () Yes	() No If you answered NO are you at least 16 years of age? () Yes () No_		
	ited States? () Yes () No		
Were you previously employed by Limest	tone Township Library? () Yes () No Dates Employed:		
) Yes () No Work evenings? () Yes () No Work Weekends? () Yes () No		
Education			

List Diploma Course of Last Year Did you School Name and Address or Degree Completed Graduate? Study 1 2 3 4 High Yes No College 1 2 3 4 Yes No Graduate 1 2 3 4 Yes No School Other 1 2 3 4 Yes No (Specify)

Other Qualifications						
Please summarize and special job-related qualifications, training (including military, apprenticeship), computer skills language proficiencies, and/or experience which you feel should be considered in reviewing your application						
Employment History						
Are you presently employed? () Ye	es () No If yes	s, may we contact your current employer? () Yes () No				
List your present or most recent en	nployer first. A res	ume will not substitute for this portion of the application.				
Employer 1						
Employer:		City, State:				
m.ii.						
-		Supervisor's title:				
Description of duties:						
Employed From: (M/Y): To	(M/Y):	Hours per week:				
Reason for leaving:						
Employer 2						
Employer:		City, State:				
Telephone:		Your Title:				
Supervisor:		Supervisor's title:				
Description of duties:						
Employed From: (M/Y): To	(M/Y):	Hours per week:				
Reason for leaving:						
Employer 3						
Employer:		City, State:				
Telephone:		Your Title:				
Supervisor:		Supervisor's title:				
Description of duties:						
Employed From: (M/Y): To	(M/Y):	Hours per week:				

Reason for leaving:

Employer 4	
Employer:	City, State:
Telephone:	Your Title:
Supervisor:	Supervisor's title:
Description of duties:	
Employed From: (M/Y):	To (M/Y): Hours per week:
Reason for leaving:	
Personal and Professio (Not former employers o	
,	1 Telatives)
Reference 1	
Name:	Relationship:
Address:	Phone:
Reference 2	
Name:	Relationship:
Address:	Phone:
Reference 3	
Name:	Relationship:
Address:	Phone:
Reference 4	
Name:	Relationship:
Address:	Phone:
Please read the following ca	arefully before agreeing below:
statement on this applicatio intended to be a contact of understand and agree that n	oplication for employment are true and complete. I understand that if employed, any false in may result in my dismissal. I further understand that this application is not and is not employment, nor does this application obligate Limestone Township Library in any way. I my employment is at-will and can be terminated by either party with or without notice at any eason. I agree to give Limestone Township Library permission to contact the employers listed ork experience.
Do you agree? () Yes () No	
Signature:	Date:

OFFICE USE ONLY					
Received	Phoned	Interviewed			