

APPLICATION FOR EMPLOYMENT

715-223-3920 http://www.abbotsfordpl.org/

POSITION: LIBRARY ASSISTANT

Applica	ant Informa	tion –	Pleas	Print all info except signature	;
Full Namo:					
Full Name: Last		Firs	t	M.I. Maiden	name
Address					
Address: Street Address					Apartment/Unit #
City				State	ZIP Code
Years at present address:			_ If u	nder 18 please list age:	
Phone:				Email:	
Date Available:		Social Security No.:			
	inge except f	or illne	ss or e	ours per week. Once a schedule is nergency. The assistant will also be n absence.	
				Fri. 9AM-5PM; Sat. 9AM-12PM (Se weekend shifts. This position require	
The staff that previously held one to two Saturdays a month		worked	d Mon.	3-7pm, every other Wed. 3pm-7pm,	Fri. 10am-5pm, and
Days/hours available to work:					
Mon: Thur:	Tue: Fri:		Wed: Sat:		
Do you have a minimum or m	aximum num	ber of	hours o	an you work weekly?	
Are you a citizen of the United	States?	YES	NO	If no, are you authorized to work in t	YES NO he U.S.?
Have you read and understood the job description for Library Assistant?		YES	NO		
Have you ever been convicted	of a crime?	YES	NO		
If yes, explain:					
		YES	NO		

High School: Address: YES NO To: Did you graduate? From: Diploma:_____ College: Address: YES NO Degree: To: Did you graduate? Address: Other: YES NO Degree: To: Did you graduate? From: References Please list two professional references below. Relationship: Full Name: Phone: Company: Address: Full Name: Relationship: Company: Phone: Address: Previous Employment History Company: Phone: Address: Supervisor: Starting Salary:\$ Ending Salary:\$ Job Title: Responsibilities: From: Reason for Leaving: To: YES NO May we contact your previous supervisor for a reference? YES If still employed, may we contact your current supervisor? П Company: Phone: Address: Supervisor: Starting Salary:\$ Ending Salary:\$ Job Title: Responsibilities: Reason for Leaving:_____ From: To: YES NO May we contact your previous supervisor for a reference?

Education

Company:Address:	
Job Title: Starting	g Salary: \$ Ending Salary: \$
Responsibilities:	
From: To:	Reason for Leaving:
May we contact your previous supervisor for a reference	YES NO
Milita	ry Service
Branch:	From: To:
Rank at Discharge:	Type of Discharge:
If other than honorable, explain:	
An application form sometimes makes it difficult for an individual here any additional experience, skills, knowledge and personal	dual to adequately summarize a complete background. Please state attributes you feel make you uniquely suited to this position.
Disclaime	r and Signature
I certify that my answers are true and complete to the If this application leads to employment, I understand the interview may result in my release.	best of my knowledge. hat false or misleading information in my application or
Signature:	Date:

Abbotsford Pubilc Library
P.O. Box 506
203 North First St.
Abbotsford WI 54405