

Application for Employment

Jackson County Public Library is an equal opportunity employer. It is our policy that all persons shall have equal employment opportunity regardless of race, sex, color, religion, national origin, age, disability, or veteran status.

It is also Jackson County Public Library's policy to safeguard and hold in the strictest of confidence the information provided by the applicant. The use of any information is limited to valid business, regulatory, or legal requirements. Application will be kept on file one year.

		Please print in ink.			
Must list position.					
Position applying for	(1)	(2)			
Name					
Last		First		Middle	
Present Address		City/State			
	Street	City/State		ZIP code	
Phone: Cell		Other			
Email Address:					
In case of emergency	/, notify				
Home address				Cell	
		ackson County Public Library?			
Yes	□No	If yes, when?			-
Do you have any rela	tives working at Jack	sson County Public Library?	□Yes	□No	
If yes, who, and where does he or she work?Relationship					
What prompted your	application?				
☐ On my own	☐ Job Posting	☐ Indeed			
Library Staff Refer	rral				
Do you have a valid E	_	□Yes □No			

Educational Record

School	Name and Location		Dates Attended (mos. & yrs.)	Highest Grade Completed	Did you Graduate? (GPA)	Type of Degree Received (AAS,BS, etc.)	Course of Study
High School	Name City and State						
College	Name City and State	From To					
College	Name City and State	From To					
Business, Trade, or Other	Name City and State	From To					

Do you have a GEI	D? □ Yes □No
-------------------	--------------

Professional Certifications

Туре	Organization or State Issued	Date Issued	Number
Туре	Organization or State Issued	Date Issued	Number

Personal Data

Applying for	Full-time Only	Part-time Only
	Full or Part-time	Temporary
Date available fo	r work	Are you available to work: weekends evenings
		on bookmobile(no chauffeur's license or CDL required)
Explain how your	background is appro	priate to the position for which you are applying.

Employment Data
List your last five places of employment, most recent first. IF YOU WORKED UNDER A NAME OTHER THAN INDICATED ON FRONT OF APPLICATION, PLEASE INDICATE BELOW.

Company name and address		Employed from		to	Starting job title	
		mo. yr.		mo. yr.		
		Type of business		•	Ending job title	
Company telephone number	May we contact the company?		Supervisor's name and job title		?	
()	Yes No					
Was the position full time?	What shift did you w	ork	Endi	ing salary		
Was the position part time?			\$			
Describe your responsibilities and duties (the work you did)					
Reason for leaving?						
Company name and address		Employed from		1	Chauting ich title	
Company name and address		Employed from		to	Starting job title	
		mo. yr. Type of business		mo. yr.	Ending job title	
Company telephone number	May we contact the	company2	Sun	pervisor's name and job title		
()	May we contact the company? Yes No		Supervisor s name and job title			
Was the position full time?	What shift did you w		Ending salary			
		\$				
Was the position part time? Describe your responsibilities and duties (the work you did)						
become your responsibilities and dates	(the Work you ala)					
Reason for leaving?						
<u> </u>						
Company name and address		Employed from		to	Starting job title	
		mo. yr.		mo. yr.		
		Type of business			Ending job title	
Company telephone number	May we contact the company?		Supervisor's name and job title		e e	
()	Yes No 🗆					
Was the position full time?	What shift did you work		Ending salary			
Was the position part time?	as the position part time?		\$			
Describe your responsibilities and duties (the work you did)						
Reason for leaving?						

Company name and address		Employed from			to		Starting job title
		mo. yr.			mo.	yr.	
		Type of busi	ness	!			Ending job title
Company telephone number	May we contact the	company?		Supervisor's name and job title		e	
()	Yes 🔲 No						
Was the position full time?	What shift did you w	ork		Endi	ng sala	ry	
Was the position part time?				\$			
Describe your responsibilities and duties	(the work you did)						
Reason for leaving?							
Company name and address		Employed from	om		to		Starting job title
		mo.	yr.		mo.	yr.	
		Type of busi	ness				Ending job title
Company telephone number	May we contact the	company?		Supervisor's name and job title		2	
()	Yes 🔲 No						
Was the position full time?	What shift did you work			Ending salary			
Was the position part time?				\$			
Describe your responsibilities and duties (the work you did)		•				
Reason for leaving?							

Professional References

Please list at least three professional references, not related to you, whom you have known at least one year.

name	address	phone number	relationship

Read carefull	y before signing
stand that if I am employed by the library, falsified statements or dismissal. I realize that past employment records, references, and authorize Jackson County Public Library to investigate any of the a	
Job offers are contingent upon the completion of a background ch	eck.
Signature	Date
For Human Resources use only	
Job title	☐ Full-time
Starting pay	☐ Part-time
Starting dateDepartment	☐ Temporary
Comments	Six month anniversary

