## Employment Application

# McLouth Public Library

|  |
| --- |
| Applicant Information |
| Full Name: |  |  |  | Date: |  |
|  Last | First | M.I. |
| Address: |  |  |
|  Street Address | Apartment/Unit # |
|  |  |  |  |
|  City | State | ZIP Code |
| Phone: |  | E-mail Address: |  |
| Date Available: |  | Social Security No.: |  | Desired Salary: | $ |
| Position Applied for: |  |
| Are you a citizen of the United States? |  |  | If no, are you authorized to work in the U.S.? | YES[ ]  | NO[ ]  |
| Have you ever worked for this company?  |  |  | If yes, when? |  |
| Have you ever been convicted of a felony? |  |  |  |
| If yes, explain: |  |
|  |
| Education |
| High School: |  | Address: |  |
| From: |  | To: |  | Did you graduate? |  |  | Degree: |  |
| College: |  | Address: |  |
| From: |  | To: |  | Did you graduate? |  |  | Degree: |  |
| Other: |  | Address: |  |
| From: |  | To: |  | Did you graduate? |  |  | Degree: |  |
|  |
| References |
| Please list three references. |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: | ( ) |
| Address: |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |
| Previous Employment |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |
| Job Title: |  | Starting Salary: |  | Ending Salary: |  |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |  |
| May we contact your previous supervisor for a reference? |  |  |  |
|  |  |  |  |
| Company: |  | Phone: | ( )  |
| Address: |  | Supervisor: |  |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |  |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|  |  |  |  |
| Company: |  | Phone: | ( )  |
| Address: |  | Supervisor: |  |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |  |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|  |
| Military Service |
| Branch: |  | From: |  | To: |  |
| Rank at Discharge: |  | Type of Discharge: |  |
| If other than honorable, explain: |  |
|  |
| Disclaimer and Signature |
|  |
| I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. |
| Signature: |  | Date: |  |