



Employment Application

Hussey-Mayfield Memorial Public Library Zionsville, Indiana

PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED, EXCEPT SIGNATURE

**APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS BEFORE HIRING
A BACKGROUND CHECK ON APPLICANTS WILL BE CONDUCTED BEFORE HIRING
ANY FUTURE EMPLOYMENT WILL BE ON AN AT-WILL BASIS**

PLEASE COMPLETE PAGES 1-4. DATE _____

Name _____

Last
First
Middle
Maiden
 Present address _____

Number Street
City
State
Zip

How long have you been at this address? _____

Cell phone: (_____) _____ - _____ Home phone (_____) _____ - _____

Position applied for: _____

Salary desired \$ _____ Email address: _____

Days/hours available to work [Be Specific]

No Preference _____ Thurs _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights till 8:45 p.m.? _____
 Can you work Saturdays from 9 a.m. to 5:15 p.m.? _____ Can you work Sundays 12:45 to 5:15 p.m.? _____

Employment desired ___ FULL-TIME ONLY ___ PART-TIME ONLY ___ FULL- OR PART-TIME

When available to begin work if hired? _____

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Post-graduate				
Bus. or Trade School				

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Please list 2 references other than relatives or previous employers.

I authorize the Hussey-Mayfield Memorial Public Library to check the references listed below ___ Yes
 ___ No

Name		Name
Position		Position
Employer		Employer
Address		Address
Telephone		Telephone
E-Mail		E-Mail

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Work Experience

Please list your work experience for the **past five years** beginning with your most recent job held.

If you were self-employed, give firm name. **Attach additional sheets if necessary.**

1.

Name of employer		Name of last supervisor	Employment Dates	Pay or Salary
Address			From:	Start:
City, State, Zip Code			To:	Final:
Phone Number				
		Your last job title:		

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Reason for leaving [be specific]

List the jobs that you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

2.

Name of employer		Name of last supervisor	Employment Dates	Pay or Salary
Address			From:	Start:
City, State, Zip Code			To:	Final:
Phone Number				
		Your last job title:		

Reason for leaving [be specific]

List the jobs that you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

3.

Name of employer		Name of last supervisor	Employment Dates	Pay or Salary
Address			From:	Start:
City, State, Zip Code			To:	Final:
Phone Number				
		Your last job title:		

Reason for leaving [be specific]

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List the jobs that you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

4.

Name of employer		Name of last supervisor	Employment Dates	Pay or Salary
Address			From:	Start:
City, State, Zip Code			To:	Final:
Phone Number				
		Your last job title:		

Reason for leaving [be specific]

List the jobs that you held, duties performed, skills used or learned, advancements or promotions while you worked for this employer.

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May we contact your present employer? Yes No

Did you complete this application yourself? Yes No

If not, who did? _____

Signature: _____