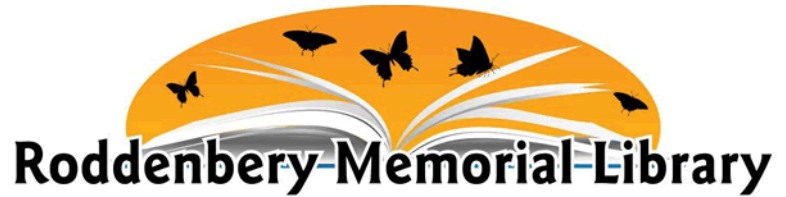


Employment Application

An Equal Opportunity Employer



320 North Broad Street

Cairo, Georgia 39828

229-377-3632

Please Print

Date: _____

Name: _____

Present Address: _____

Telephone: _____ Date of Birth: _____

Do you have a library card? Yes No

Employment Desired

Position applied for: _____

Salary Expected: _____

What hours/days are you available? _____

If hired, on what date can you start work? _____

List any friends/relatives working here: _____

Do you have any special skills, qualifications, or experience that could be related to this position?

Do you have any typing skills, personal computer knowledge (list any software that you are familiar with), or experience with the Internet? _____

Education

School	Name & Location	# of years completed	Degree or Diploma
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High School

Tech School

College

Employment History

List below all present and past employment, starting with your most recent employer.

Name of employer: _____

Date of employment: From _____ To _____

Location: _____

Phone: _____ Type of business: _____

Supervisor's name: _____

Your position and duties: _____

Reason for leaving: _____

Name of employer: _____

Date of employment: From _____ To _____

Location: _____

Phone: _____ Type of business: _____

Supervisor's name: _____

Your position and duties: _____

Reason for leaving: _____

Name of employer: _____

Date of employment: From _____ To _____

Location: _____

Phone: _____ Type of business: _____

Supervisor's name: _____

Your position and duties: _____

Reason for leaving: _____

Name of employer: _____

Date of employment: From _____ To _____

Location: _____

Phone: _____ Type of business: _____

Supervisor's name: _____

Your position and duties: _____

Reason for leaving: _____

References

List below three persons who can serve as personal references and who might have knowledge of your work experience. If you have not worked in the past few years, please give personal references, other than relatives.

1. Name: _____ Daytime Phone: _____

Occupation: _____ # of years acquainted: _____

2. Name: _____ Daytime Phone: _____

Occupation: _____ # of years acquainted: _____

3. Name: _____ Daytime Phone: _____

Occupation: _____ # of years acquainted: _____

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. I hereby authorize the Roddenbery Memorial Library to investigate my references, work record, education, and other matters related to my suitability for employment.

Signature of applicant: _____

Additional comments (if needed): _____

