### **Application for Employment**

Michigan City Public Library 100 East Fourth Street Michigan City, IN 46360



MICHIGAN CITY PUBLIC LIBRARY

Name			Date
Last	First	Middle	
Address			
Number	Street (		
S	City	State	Zip Code
Phone (cell)		(home)	
Email			
Position(s) applied for:	1	Pay rate exp	pected
	2	Pay rate exp	pected
Work availability: Full t	ime Part time Da	ys Nights	Weekends Any
Have you previously been e	mployed here? If so, when? _		* 
List any friends and/or rela	tives employed here:		
What is your date for availa	bility to start employment her	e?	
Can vou operate a compute	r? List specific co	omputer programs you	are familiar with
our jou operate a compare		por programs year	
Describe other experiences,	skills, or qualifications which	you feel would especia	ally fit for your employment

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most states also prohibit some or all of the above types of discrimination based on ancestry, marital status, or physical or mental handicap, or disability.

## Employment Experience (List most current employment first)

Employer	Dates Employed (starting/ending)	Work Performed
Address		
Job Title	/	
Supervisor	Salary (starting/ending)	
Reason for leaving		Æ
	0:	
Employer	Dates Employed (starting/ending)	Work Performed
Address		
Job Title		
Supervisor	Salary (starting/ending)	
Reason for leaving		
Employer	Dates Employed (starting/ending)	Work Performed
Address		
ob Title		3
Supervisor	Salary (starting/ending)	
Reason for leaving		
	4	-41
ummarize special skills and qualific	cations acquired from past employment or	other experience:
	above? Yes No	
	t wish us to contact:	
	t winii un to contact.	

#### **Education**

	Name and Address of School	Last year completed	Did you graduate?	Degree/ Diploma
High School				
College		11		
Other				

# References (Do not list former employers or relatives.)

Name and occupation	Address	Phone Number
V		
		:
The also and Co. 41 and 41 a Co. 44 and Co. 41 and Co.	d. d d	
I herby certify that the facts set forth in best of my knowledge.	the above employment application a	ire true and complete to the
Signature of applicant		Date

## APPLICANT: DO NOT WRITE ON THIS PAGE Office Use Only

Interview: Yes_	No	Date	Time
Remarks:			
			н
Employed Yes	_ No	Date of empl	oyment
Position		I	Department
Ву	Nome o /Tital		Date
	Name/ Hu	le	
	TO BE CON	IPLETED AF	TER EMPLOYMENT
IN CASE OF AN EM	ERGENCY, P	LEASE NOTIFY	(list two or three):
Name			Phone
Address			Relationship
Name			Phone
Address		9	Relationship
Name			Phone
Address			Relationship