

Syracuse-Turkey Creek Township Public Library

115 East Main Street

Syracuse IN 46567

574.457.3022

An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION:

Name _____ Phone (____) _____

Address _____
Street City State Zip

Email _____@_____

Are you related to a Syracuse Public Library staff or board member? Yes ___ No ___

Are you 18 years old or older? Yes ___ No ___ Do you have a library card? Yes ___ No ___

EMPLOYMENT DESIRED:

Position _____ Date you are available _____

Which computer programs including word processing, spreadsheet and database software are you experienced in using?

Languages spoken other than English: _____

Other special skills _____

EDUCATION			
School level	Name and location of school	Graduation date	Degree/ subjects studied
High School			
Vocational Education			
College			
Post Graduate			
Special training/Other			

WORK HISTORY

Name of most recent employer _____ Phone _____

Starting date _____ Leaving date _____
Mo./Yr. Mo./Yr.

Job title _____ Name of Supervisor _____ May we contact? _____

Description of work _____

Reason for leaving _____

Name of previous employer _____ Phone _____

Starting date _____ Leaving date _____
Mo./Yr. Mo./Yr.

Job title _____ Name of Supervisor _____ May we contact? _____

Description of work _____

Reason for leaving _____

REFERENCES

Name _____ ph: _____

Name and phone
of 3 references
(unrelated to you)

_____ ph: _____

_____ ph: _____