Southworth Library Association P.O. Box 45, Dryden New York 13053

Employment Application

Applicant Information

Full Name: _____ Date: _____

Last *First* *M.I.*

Address: _____

Street Address *Apartment/Unit #*

_____

City *State* *ZIP Code*

Phone: **( )** E-mail Address:

Date Available: Birthdate:

Position Applied for: **Library Aide**

Have you ever been convicted of a felony? YES ☐ NO ☐

If yes, explain:

Education

High School: Address:

From: To: Did you graduate? YES ☐ NO ☐ Degree:

College: Address:

From: To: Did you graduate? YES ☐ NO ☐ Degree:

Other: Address:

From: To: Did you graduate? YES ☐ NO ☐ Degree:

References

Please list two non-related references.

Full Name: Relationship:

email: Phone: **( )**

Address:

Full Name: Relationship:

email: Phone: **( )**

Address:

Previous Employment

Company: Phone: ( )

Address: Supervisor:

Job Title:

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: Phone: ( )

Address: Supervisor:

Job Title:

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES ☐ NO ☐

List relevant skills and additional experience as desired:

Please send the completed application and a brief description describing your qualifications and interest in this job by June 5, 2023 to :
Diane Pamel, Southworth Library, P.O. Box 45, Dryden, NY 13053 or email to director@southworthlibrary.org

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: _____