

Almont District Library
213 W. St. Clair, P.O. Box 517
Almont, MI 48003-0517
Phone: 810-798-3100/ Fax: 810-798-2208

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this library? YES NO If yes, when? _____

Do you have any special training skills, qualifications, licenses, certifications or other experiences that relate to the position applied for?

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

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

Other: _____ Address: _____

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

References

Please list three references of persons, not related to you, whom you have known for over a year..

Full Name: _____ Years Known: _____

Address: _____ Phone: _____

Full Name: _____ Years Known: _____

Address: _____ Phone: _____

Full Name: _____ Years Known: _____

Address: _____ Phone: _____

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
