

LINCOLN PARISH LIBRARY EMPLOYMENT APPLICATION
(An Equal Opportunity Employer)

PERSONAL INFORMATION

Date _____

 Name (First) (Middle Initial) (Last)

 Address (Street) (Apt.) (City) (State) (Zip)

 Telephone Number Alternative Number

Are you 16 years or older? ____ Yes ____ No

EMPLOYMENT DESIRED

Position Desired _____ Part-Time ____ Full-Time ____

Date you desire employment _____ Salary Desired _____

EDUCATION

Name and Address of School	Yrs. Attended	Degree or Diploma
High School		
College/Univ.		
Other		

EMPLOYMENT HISTORY

List present and past employment, beginning with your most recent.

Employer Name/Address:	Position:	Dates of Employment:
Duties		
Rate of Pay:	Supervisor:	Phone Number:
Reason for Leaving:		
May we contact? If no, please explain:		

Employer Name/Address:	Position:	Dates of Employment:
Duties:		
Rate of Pay:	Supervisor:	Phone Number:
Reason for Leaving:		
May we contact? If no, please explain:		

Employer Name/Address:	Position:	Dates of Employment:
Duties:		
Rate of Pay:	Supervisor:	Phone Number:
Reason for Leaving:		
May we contact? If no, please explain:		

GENERAL INFORMATION

Are you a U.S. citizen? ____Yes ____No
 Have you ever been employed with this Library? ____Yes ____No
 My computer skills are: ____ Basic ____ Average ____ Advanced
 Do you have a current Chauffeur's license? ____ Yes ____ No
 Do you have physical limitations that keep you from lifting 30 pounds to waist height? ____ Yes ____ No
 Do you have physical limitations that do not allow you to bend from the waist or to kneel? ____ Yes ____ No
 Have you ever been convicted of a felony? ____Yes ____No

REFERENCES:

List at least three (3) people not related to you who have first hand knowledge of your skills and abilities.

Name	Address	Relationship	Phone Number

RELATIVES:

List names and relationship of any relatives already employed by the Lincoln Parish Library or the Lincoln Parish Police Jury.

EMERGENCY INFORMATION

In case of emergency notify:

Name

Address

Phone Number

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize verification of all statements contained herein and the references listed above and release all parties from all liability for any damage that may result from the furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

I authorize Lincoln Parish Library to conduct a criminal background check and understand that information gathered in background check may be used to determine employment eligibility.

Signature of Applicant

Date

Lincoln Parish Library Preliminary Interview

1. Please describe your computer skills, including games/internet/email.
2. Do you have your own transportation?
3. Do you have any relatives or friends working for the Lincoln Parish Library? Who?
4. If you are a student, what is your class schedule?
5. This job requires working nights and weekends. Are you available for those hours?

6. Are you willing to work a flexible schedule as needed?

7. In what capacities have you used the Lincoln Parish Library or other libraries?

FOR OFFICE USE ONLY

Date of Interview	Position	Hire Date	Salary
Comments:			

Revised 8-10-2017