

East Mississippi Regional Library

Employment Application

		Applicant	Informa	ation						
Full Name:	I Name:			Date:						
i dii i vaine.	Last	First			M.I.					
Address:										
Address.	Street Address					Apartment/Unit #	:			
	City				State	ZIP Code				
-	•									
Phone:			Email							
Date Available: Social Security No.:_			Desired Salary:\$							
Position Apr	olied for									
FOSITION APP	blied for:									
Are you a ci	tizen of the United States?	YES NO	If no, a	are you	authorized to v	YES work in the U.S.?	NO			
		YES NO								
Have you ev	ver worked for this compar	ny?	If yes, v	when?_						
YES NO										
Have you ever been convicted of a felony?										
If yes, expla	in:									
Education										
High School: Address:										
g										
From:	To:	_ Did you graduate	YES ∋? □	NO	Diploma:					
College:		Addres	·e·							
College		Addics								
From:	To:	_ Did you graduate	YES ∋? □	NO	Degree:					
Oth an		A -1 -1								
Other:		Addres	S:							
From:	To:	Did you graduate	YES ≘? □	NO	Degree:					
		Previous		ment						
			<u> </u>	ment	_					
Company:						Phone:				
Address:					Supe	rvisor:				

Job Title:	Fitle: Starting S			Ending Salary:\$			
Responsibilities:							
From:	Reason f	Reason for Leaving:					
May we contact your previ	ous supervisor for a reference?	YES	NO				
Company:				Phone:			
Address:				Supervisor:			
Job Title:	Starting S	Salary:		Ending Salary:			
Responsibilities:							
From:	To:	Reason fo	or Leaving:_				
May we contact your previ	ous supervisor for a reference?	YES	NO				
Company:				Phone:			
Address:				Supervisor:			
Job Title:	Starting Salary:			Ending Salary:			
Responsibilities:							
From:	To:	Reason for Leaving:					
May we contact your previ	ous supervisor for a reference?	YES	NO				
	Military Servic	e (If appli	icable)				
Branch:			From:_	To:			
Rank at Discharge:		Type of Discharge:					
If other than honorable, ex	plain:						
	Refer	rences					
Please list three profession	onal references.						
Full Name:	Relationship:						
· · · · · · · · · · · · · · · · · · ·				Phone:			
Address:							
Full Name:				Relationship:			

Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
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Add	litional Experience
Use this space to describe any additional experience	ce you have that you think is relevant:
Discla	aimer and Signature
I hereby authorize the East Mississippi Regional pre-employment screening process, and, if I am I	Library to obtain reports relevant to my background as part of the hired, at any time during my employment. I understand that these arch of my criminal background, reference checks, driving record
I also certify that my answers are true and compl	ete to the best of my knowledge.
If this application leads to employment, I understainterview may result in my release.	and that false or misleading information in my application or
Please print document and sign below to show yo	ou understand the above statements.
Signature:	Date: