PEORIA PUBLIC LIBRARY APPLICATION FOR EMPLOYMENT AS A PAGE

PERSONAL DATA	Date		
Name (last, first, middle)			
Present Address	City	Zip Code Telephone Number	
Social Security Number			
Date and Place of Birth		Age	
Name of Father of Mother	Address		
Do you have your parent's permission to work	? Yes □ No		
EDUCATION - Circle Highest Grade Comple	eted: 8 9 10 11 1	2 13 14	
Type of School Name and	Location	Diploma or Certificate	Grade Pt Avg.
High School □ College □		Yes □ No □	
What courses are you taking, i.e. College Prepa	aratory, Commercial?		
Name of your school counselor		Phone no.	
SKILLS Typing: No □ Yes □ Type of comp (An aptitude test is required for employment.)	outers		
ACTIVITIES			
Please list all school activities in which you pa	rticipate:		
Do these activities require time off during ever If yes, when:	nings or Saturdays?	Yes □ No □	
Are you in a work study program?		Yes □ No □	
AVAILABILITY Are you available for employment up to 40 hor Christmas, Spring and Summer vacations? Ye Can you work from 5:00 p.m. until 9:00 p.m. to How soon after receiving an appointment could	es	any nights? Yes	□ No □

EMPLOYMENT RECORD

Starting with most recent, list all positions held.

Name of Company	Supervisor	Supervisor		
Address	Telephone number	Telephone number		
Your title	Date started	Date ended		
Reason for leaving	Starting salary	Ending salary		
Your responsibilities				
Name of Company	Supervisor	Supervisor		
Address	Telephone number	Telephone number		
Your title	Date started	Date ended		
Reason for leaving	Starting salary	Ending salary		
Your responsibilities				
Name of Company	Supervisor	Supervisor		
Address	Telephone number	Telephone number		
Your title	Date started	Date ended		
Reason for leaving	Starting salary	Ending salary		
Your responsibilities				
Name of Company	Supervisor	Supervisor		
Address	Telephone number	Telephone number		
Your title	Date started	Date ended		
	Starting salary	Ending salary		
Reason for leaving	· ···· · · · · · · · · · · · · · · · ·			

I understand that any false or misleading statements made by me on this application may prevent my employment or may be cause for dismissal

if hired. I further understand that employment, if offered, 1. - will be contingent upon my satisfactorily passing a pre-employment physical examination provided by the Library, and 2. - may require working evenings, Saturdays and Sundays after Noon.

I herby authorize my former employers and others to give any information they have regarding me or my employment with them and release

them and their companies from any liability for damage resulting therefrom.

		4/04
Date	Signature	