

Alcona County Library  
312 W. Main  
Harrisville, MI 48740  
Phone 989-724-6796, Fax 989-724-6173

## APPLICATION FOR EMPLOYMENT ALCONA COUNTY LIBRARY

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.

Position applied for \_\_\_\_\_ Date of Application \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name Middle Initial

\_\_\_\_\_  
Address City Zip Code

\_\_\_\_\_  
Telephone Number email

If you are under 18 years of age, can you provide the required proof of your eligibility to work?  Yes  No

Have you ever been employed with us before?  Yes  No

Are you currently employed?  Yes  No

If yes, may we contact your current employer?  Yes  No

Current employer name and phone number with area code

\_\_\_\_\_  
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No

(Proof of citizenship or Immigration status will be required upon employment)

Have you been convicted of a felony within the last 7 years?  Yes  No

(Conviction will not necessarily disqualify an applicant from employment)

If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_

## Education

	Name & address of school	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other Specify				

Describe any specialized training, apprenticeship, skills, and extra-curricular activities that are job related. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Summarize special job-related skills and qualifications acquired from employment or other experience. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Specialized Skills:** Check all that apply

Calculator\_\_\_\_ Fax\_\_\_\_ Other (list) \_\_\_\_\_  
 Wordperfect\_\_\_\_ Microsoft Word\_\_\_\_ \_\_\_\_\_  
 Internet\_\_\_\_ Excel\_\_\_\_ E-mail\_\_\_\_ \_\_\_\_\_

## References

1. \_\_\_\_\_  
 (Name) Phone # Relationship  
 \_\_\_\_\_  
 (Address)
2. \_\_\_\_\_  
 (Name) Phone # Relationship  
 \_\_\_\_\_  
 (Address)
3. \_\_\_\_\_  
 (Name) Phone # Relationship  
 \_\_\_\_\_  
 (Address)

# Employment Experience

Start with you present and last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates employed	Work Performed
Address			
Telephone Numbers		Hourly Rate/Salary	
Job Title	Supervisor		
Reason for Leaving			
Employer		Dates employed	Work Performed
Address			
Telephone Numbers		Hourly Rate/Salary	
Job Title	Supervisor		
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Job Title	Supervisor		
Reason for Leaving			

If you need additional space, please copy this page or continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held. (You may exclude membership that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)

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