

310 N. Quincy St. Clinton, IL 61727 (217) 935-5174 phone (217) 935-4425 fax

Application for Employment

	Last				First			MI		
Present Address:					City			State		
Phone: ())	·	Email							
What times are	you av	ailable to	work? Libra	ry Hours: I	Mon-Thu S	am-7p	m, Fri 9am-4	pm, So	at 9am-1pm	
Monday	Tue	esday	Wedne	esday	Thursd	ay	Friday		Saturday	
Do you have	any sp	ecial skill	s?							
Do you have	compu	iter expe	rience?		If so,	how m	uch?			
Norked with	Word?_		Excel?	Р	owerPoi	nt?	Ot	her?_		
lave you trai	ned oth	ners? If s	o, state nat	ure of tro	iining.					
mployment Red					U					
		nding Date Name of Emplo			oyer Your Occupation			Reason for Leaving		
	<u> </u>									
Educational Rec	ord (use				Handad	Doc	Farmand	C	a at Childre	
3011001		Location		Years Atten		nded Degree Earned		Course of Study		
								-		
References (Giv	e three re	eferences -	NO RELATIVE	S)				1		
Name		Rel	Relationship			Address			Phone Number	

Date_____

Signature_____