

EMPLOYMENT APPLICATION FORM

Morgantown Public Library System
373 Spruce Street, Morgantown, WV 26505
(304)291-7425 | askmympls@gmail.com



All information submitted is subject to verification and will be kept confidential.

SECTION 1

Position Applying For: _____

Name: _____
(First) (Middle Initial) (Last)

Address: _____
(Street Address) (City)

Address: _____ Phone: _____
(State) (Zip)

Email: _____ When can you start work? _____

Are you lawfully authorized to work in the US? _____ Do you have a valid driver's license? _____

Will you be able to work weekends? _____ Will you be able to work evenings? _____

SECTION 2

What is your highest education level? _____ Are you still attending school? _____

List schools you attended after eighth grade. Please include any military, college, or trade education:

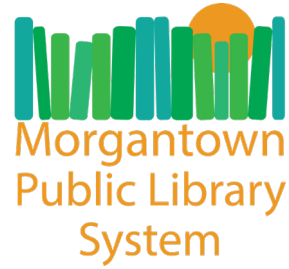
(School) (Diploma/ Certification)

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SECTION 2 (continued)

List work experiences beginning with the most recent employer. (If applicable, include military service work)

1. _____
(Name of Employer) *(Position Title)*

(Position Title and Responsibilities)

(Position Title and Responsibilities)

(Dates of Employment, From-To)

(Employer Address and Phone)

2. _____
(Name of Employer) *(Position Title)*

(Position Title and Responsibilities)

(Position Title and Responsibilities)

(Dates of Employment, From-To)

(Employer Address and Phone)

3. _____
(Name of Employer) *(Position Title)*

(Position Title and Responsibilities)

(Position Title and Responsibilities)

(Dates of Employment, From-To)

(Employer Address and Phone)

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SECTION 3

Tell us why you would be a good fit for this position: _____

SECTION 4

Please list three professional references:

1.	_____	_____
	<i>(Name)</i>	<i>(Professional Relation)</i>
	_____	_____
	<i>(Email)</i>	<i>(Phone)</i>
2.	_____	_____
	<i>(Name)</i>	<i>(Professional Relation)</i>
	_____	_____
	<i>(Email)</i>	<i>(Phone)</i>
3.	_____	_____
	<i>(Name)</i>	<i>(Professional Relation)</i>
	_____	_____
	<i>(Email)</i>	<i>(Phone)</i>

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SECTION 5

I acknowledge that the information I provided is true and I give permission to the Morgantown Public Library System to verify all information in this application

(Signature)

(Date)