## **BRISTOL PUBLIC LIBRARY**

P.O. Box 220 1855 Greenville Road N. W. Bristolville, Ohio 44402 Phone: (330) 889-3651 FAX: (330) 889-9794

Email: bristol@oplin.lib.oh.us

## APPLICATION FOR EMPLOYMENT

Name:	Age if under 18
Address:	Phone:
City, State Zip:	
Position applied for:	FULL TIME PART TIME
WORK EXPERIENCE Begin with present position. related to the job.	Include the most important knowledge, skills and abilities
Name of present employer:	Supervisor:
Address:	Phone:
City, State Zip:	
Salary/wages:	Dates of employment:
May we contact this employer for a reference?	
Name of past employer:	Supervisor:
Address:	Phone:
City, State Zip:	
Salary/wages:	Dates of employment:

Describe other pertinent knowledge or skills:

REFERENCES List three references below. Do not include relatives.		
Name:		
Address:	Phone:	
City, State Zip:		
Name:		
Address:	Phone:	
City, State Zip:		
Name:		
Address:	Phone:	
City, State Zip:		
Are you able to travel when the job requires it? YES _	NO	
Have you been convicted of a felony within the last 7 years	ears? YES NO	
If yes, please explain		
Are you related to any member of the Bristol Public Library? YES NO	orary Board of Trustees or any employee of the Bristol	
	n is complete and accurate to the best of my knowledge, sation; and I understand that falsification could be cause	
Applicant's Signature	Date	