



EMPLOYMENT APPLICATION
WILLIAMSPORT-WASHINGTON TWP.
PUBLIC LIBRARY
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WILLIAMSPORT, IN 47993
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(765) 762-6588 fax
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 revised 2-1-2019 cb

Applicant Name: _____

Date of Application: _____

Nickname: _____

Social Security Number: _____

Address: _____

Phone Number: _____

(City) (State) (Zip Code)

Applied here Before: _____

Personal Information

Number of years of Education completed: _____

Date of Graduation: _____

Name of School attended: _____

Diploma/Degree: _____

Other Specialized Training: _____

Type of work looking for: _____

Dates and Times of Availability: _____

Last or Current Employer: _____

Job title/duties: _____

Address/ Phone Number: _____

Previous Employer: _____

Job Title/Duties: _____

Address/ Phone Number: _____

Previous Employer: _____

Job Title/Duties: _____

Address/ Phone Number: _____

An affirmative answer to the following would not be a barrier to employment. Factors such as age, seriousness and time of the offense and the nature of the violation would be taken into consideration.

Have you ever been convicted following an arrest for anything other than a traffic violation? _____

Number of days absent from work in the last 12 months: _____ Reason for Absence _____

US Citizen or Legal right for employment in the US: _____

Please attach Resume with at least three (3) references, providing address and phone numbers. No relatives please.

By signing here you are authorizing WWTPL to verify employment and back ground check. I also affirm that the information included within this application is accurate and complete to the best of my knowledge. _____

(Signature)