

APPLICATION FOR EMPLOYMENT

Please Print when filling out application.
All fields marked with an asterisk (*) are required.

PERSONAL INFORMATION					
	*Name (Last, First, MI):		*DOB:		
	*Address:		*City:	*State: *Zipcode:	
	*Contact Number:	Email:			
ADE	DITIONAL INFORMATION	ON			
	How long have you beer Have you ever been con If yes, please explain: Alternate name(s) nece If yes, please explain:	victed of a felon	λ.	Yes No Yes No	
APPLICATION DETAILS					
	Position applied for: Employment Type: Available Start Date:	Full Time	CML Part Tir	eferred (if applicable): PPL Page Sired Pay:	
EDU	CATION				
	*School/College:		*Year	*Diploma/Degree	

PROFESSIONAL REFERENCE

If applying for a Page position with no work experience, please use academic and personal references in place of employment references.

	*Place of Employment:	*Employer Name:
*Employment Dates: to	*Contact Number: Email	 :
*Employment Dates: to *Place of Employment: *Employer Name: *Contact Number: Email: *Job Title: *Place of Employment: *Employer Name: *Place of Employment: *Employer Name: *Contact Number: Email: *Job Title: *Job Title: *Employment Dates:	*Job Title:	
*Contact Number: Email: *Job Title: *Employment Dates: to *Place of Employment: *Employer Name: *Contact Number: Email: *Job Title: *Employment Dates: to If desired, list any skills, accomplishments, and/or experiences which you		to
*Job Title: *Employment Dates: to *Place of Employment: *Employer Name: *Contact Number: Email: *Job Title: *Employment Dates: to f desired, list any skills, accomplishments, and/or experiences which you	*Place of Employment:	*Employer Name:
*Employment Dates: to *Place of Employment: *Employer Name: *Contact Number: Email: *Job Title: *Employment Dates: to f desired, list any skills, accomplishments, and/or experiences which you	*Contact Number: Email	
*Place of Employment: *Contact Number: Email: *Job Title: *Employment Dates: to f desired, list any skills, accomplishments, and/or experiences which you	*Job Title:	
*Contact Number: Email: *Job Title: *Employment Dates: to	*Employment Dates:	to
*Job Title: *Employment Dates: to f desired, list any skills, accomplishments, and/or experiences which you	*Place of Employment:	*Employer Name:
*Employment Dates: to	*Contact Number: Email] <u>:</u>
If desired, list any skills, accomplishments, and/or experiences which you	*Job Title:	
If desired, list any skills, accomplishments, and/or experiences which you consider important in a public library setting.	*Employment Dates:	to

AUTHORIZATION

I authorize Pearl River County Library System to obtain information about me from my previous employers and schools. I authorize my previous employers and schools that I have attended to disclose to Pearl River County Library System su information about me as Pearl River County Library System may request.					
	*Signature	*Date			
νC	CURACY				
	I verify that the statements I have made in this application are true and complete. I understand that if I am hired, any false or incomplete statements in this application may be grounds for immediate discharge.				
	*Signature	*Date			



900 Goodyear Boulevard | Picayune, MS 39466 Phone: 601-798-5081

Having submitted an application for employment to the Pearl River County Library System, I understand that I may be the subject of a criminal background check for verification. I agree to and consent to said background check in compliance with Miss. Code §25-1-111 (1972 as amended) and does not contravene said statute. The statute reads as follows:

From and after July 1, 2013, the state and any county, municipality or any other political subdivision may not employ a person who has been convicted or pled guilty in any court of this state, another state, or in federal court of any felony in which public funds were unlawfully taken, obtained or misappropriated in the abuse or misuse of the person's office or employment or money coming into the person's hands by virtue of the person's office or employment.

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*Signature	*Date