



APPLICATION FOR EMPLOYMENT

405 Main Street, Yarmouth, NS B5A 1G3
Telephone: 742-2486 Fax: 742-6920

NAME: _____

ADDRESS: _____

Postal Code _____ Telephone: _____

Position applied for:

PROFESSIONAL ADMINISTRATION CLERICAL STUDENT OTHER

Which Library Branch? _____

EDUCATION

	INSTITUTION	YEAR(S) ATTENDED (List years)	DEGREE(S) AND/OR CERTIFICATE(S) OBTAINED
COLLEGE/ UNIVERSITY			
HIGH SCHOOL			
OTHER (SPECIAL TRAINING COURSES, ETC.)			

Volunteer Activities:

Please Note: All appointments are conditional on the satisfactory responses from required Criminal Records and Child Abuse Registry Checks.

EMPLOYMENT HISTORY (List most recent job first)

EMPLOYER: _____
Name Address Telephone

SUPERVISOR: _____

DATE EMPLOYED: From _____ To _____ Full Time Part Time Hrs/Week _____

DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____
Name Address Telephone

SUPERVISOR: _____

DATE EMPLOYED: From _____ To _____ Full Time Part Time Hrs/Week _____

DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____
Name Address Telephone

SUPERVISOR: _____

DATE EMPLOYED: From _____ To _____ Full Time Part Time Hrs/Week _____

DUTIES: _____

REASON FOR LEAVING: _____

REFERENCES - YOU WILL BE REQUIRED TO PROVIDE THE NAMES OF THREE REFERENCES (WITH ADDRESS & TELEPHONE NUMBER) IF YOU ARE CALLED FOR AN INTERVIEW.

May we contact your present employer? Yes No If NO, please explain.

May we contact your previous employer(s)? Yes No If NO, please explain.

I declare that the information contained in this application is accurate and complete to the best of my knowledge. I understand that failure to provide accurate and complete information may affect my application and/or future employment.

Signature

Date