

31 Broadway, Greenlawn, NY 11740

Tel: 631-757-4200 | harborfieldslibrary.org info@harborfieldslibrary.org

APPLICATION FOR EMPLOYMENT

	Part-time (M	ax 17hrs)	Date	
PERSONAL DATA Name				
Namo	Last	First	Middle	
Current Address				
	Street	City	State	Zip Code
Previous Address	_	-	_	-
	Street	City	State	Zip Code
Telephone #		_ Email_		
Are you eligible to work	in the United States	?		☐Yes ☐No
Are you available to wo	rk during Library hou	ırs: Monday th	nru Friday 9 a.m 9 p.m.	Yes No
		Saturday	9 a.m 5 p.m.	☐Yes ☐No
		Sunday 1	p.m 5 p.m.	Yes No
Does your name curren	tly appear on any Ci	vil Service lists	?	☐ Yes ☐ No
Please list titles:				
EDUCATION		Circle	Did You	List Diplomas
School Name 8	& Address	Current Grade		or Degrees
High School		Freshman	Yes Year	
			No	
O-II		Sophomore		
College		Junior	Yes Year	
1			A 1	
		Senior	No	
Major Course Work		Senior	No	
Major Course Work		Senior	No	
Major Course Work Graduate Work		Senior	No Yes Year	
		Senior		
		Senior	Yes Year	
	any computers and c		Yes Year No	
Graduate Work	any computers and c		Yes Year No	

	Employer		act your present or past employer(s)? _ Telephone #
٠.	Address		
			Full-time or Part-time
			i dii-time of i art-time
	Reason for leaving		
	Supervisor	Nama	T:41 -
2	Employer	Name	Title Telephone #
۷.	Address		
			Full-time or Part-time
	' '		T dil-time of Fart-time
	<u> </u>		
	Supervisor		
		Name	Title
qu	alifications for the position to	which you are applying	ives and friends who can comment on your . Students include one reference from school.
qua (te	alifications for the position to acher, guidance counselor or	which you are applying club advisor).	. Students include one reference from school.
qua (te	alifications for the position to acher, guidance counselor or Name	which you are applying club advisor).	. Students include one reference from school. Telephone #
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