APPLICATION FOR EMPLOYMENT

CERTIFICATION



Willard Library 21 First Avenue Evansville, Indiana 47710 http://www.willard.lib.in.us

	NFORMATION			DATE				
NAME	LAST	FIRST	MIDDLE					
SOCIAL	SECURITY NUMBER							
PRESEN	IT ADDRESS							
	STREET							
	CITY	STATE	ZIP					
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PHONE I	NUMBER	E-MAIL						
DATE YO	DU CAN START	SAL	ARY DESIRED					
DATE YO	DU CAN START	SAL NO IF SO MAY WE INQUIRE	ARY DESIRED	YER? Yes	No			
DATE YO ARE YOU EVER AP	DU CAN START U EMPLOYED NOW? Yes PPLIED TO WILLARD LIBRAI	SAL NO IF SO MAY WE INQUIRE	ARY DESIRED DF YOUR PRESENT EMPLO EN?	YER? Yes	No			
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U.S. M	ILITARY O	R NAVAL SERVIC	E		RAN	NK			
PRESE	NT MEMB	ERSHIP IN NATIO	NAL C	GUARD OR RESERVES Yes	No				
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SIGNATURE OF A	PPLICANT	•							
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NAME	ME			ADDRESS			PHONE NUMBER		
OMISSIONS, OR M AT ANY TIME. IN C FURTHER AGREE ⁻¹ WILLARD LIBRARY	IISREPRES ONSIDERA THAT MY E '. I UNDERS AS ANY AL	ENTATIONS ARE I ITION OF MY EMP EMPLOYMENT AN STAND THAT NO V JTHORITY TO ENT	DISCO\ LOYME D COM VILLAR	BY ME ON THIS APPLICATION IS TO VERED, MY APPLICATION MAY BE F ENT, I AGREE TO CONFORM TO WIL IPENSATION CAN BE TERMINATED, ID LIBRARY REPRESENTATIVE, OTH TO ANY AGREEMENT FOR EMPLOY	REJECTED AN LARD LIBRAF WITH OR WIT IER THAN ITS	ID, IF I AM EMPLOYED, M RY'S RULES, REGULATIC THOUT CAUSE, AND WIT DIRECTOR, AND THEN (IY EMPLOYMEN' DNS, AND PERSC TH OR WITHOUT DNLY WHEN IN V	T MAY ONNEL NOTIC WRITIN	BE TERMINATED L POLICIES, AND I DE, AT ANY TIME BY NG AND SIGNED BY
DATE				SIGNATURE					