

# UPPER ST. CLAIR TOWNSHIP LIBRARY APPLICATION FOR LIBRARY PAGE

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street City Zip Code

Phone Number \_\_\_\_\_

If under 18 years old, parent or guardian's name \_\_\_\_\_

School and current grade level \_\_\_\_\_

School Activities \_\_\_\_\_  
\_\_\_\_\_

Other activities or Hobbies \_\_\_\_\_  
\_\_\_\_\_

### Previous Employment:

Place \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact this employer? \_\_\_\_\_

Place \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact this employer? \_\_\_\_\_

### Names and Phone Numbers of two Adult References:

\_\_\_\_\_

\_\_\_\_\_

Days and Hours you are available to work \_\_\_\_\_

\_\_\_\_\_

Date you are available to begin work \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant