Mooresville Public Library Application for Employment



We are an Equal Opportunity Employer. As ascribed by the State of Indiana, MPL is an at-will employer Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name						
Address		City	State	Zip		
Phone Number	Mobile Number		Email Address			
Are you eligible to work in the United States? Yes \(\subseteq \text{No } \subseteq \)		Are you able to work evenings and weekends? Yes No No				
If selected for employment, you will be required to submit to a background check. Are you willing to undergo a background check? Yes \[\] No \[\]						
Position						
Position You Are Applying For		Available Start Date		Desired Pay		
Employment Desired			☐ Part Time	☐ Seasonal/Temporary		
Education						
School Name	Loca	ion	Years Attended	Degree Received	Major	
			Name II and have of			
Other Relevant Courses/Training		Name/Location of Institution	Length of Course	Date		
Professional Certification Certification Num						
Professional Certificatio	n Certificat	ion Num	ber	Date Issued	Expiration Date	
Professional Certificatio	n Certificat	ion Num	nber	Date Issued	Expiration Date	
Professional Certificatio	n Certificat	ion Num	aber	Date Issued	Expiration Date	

References (business and professional only)						
Name	Title	Company	Phone			
Employment History						
Employer (1)	Job Title		Dates Employed			
World Dhara	Jah Dutias		Fadina Dev Dete			
Work Phone	Job Duties		Ending Pay Rate \$ Per			
Address	City	State	Zip			
Reason for leaving:						
Formula (0)	Lab Title		Datas Faralassad			
Employer (2)	Job Title		Dates Employed			
Work Phone	Job Duties		Ending Pay Rate			
			\$ Per			
Address	City	State	Zip			
Reason for leaving:						
Reason for leaving: Employer (3) Job Title Dates Emp						
Limployer (5)	Job Title		Dates Employed			
Work Phone	Job Duties		Ending Pay Rate			
		1	\$ Per			
Address	City	State	Zip			
Reason for leaving:						
reason for loaving.						
Signature Disclaimer						
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
Name (Please Print)	Signature					
Date						