



LONOKE COUNTY LIBRARIES

Cabot • Carlisle • England • Lonoke

APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

INSTRUCTIONS FOR COMPLETING THIS FORM – Please read carefully!

Please print in ink or type all entries. An incomplete or illegible application may jeopardize your opportunity for employment. Eligibility to compete for positions is based on a review of your application. Only information provided will be evaluated. Be certain that you complete all items as fully and accurately as possible.

Applications can be submitted in person or mailed to the library with the position for which you are applying.

Administrative Office	204 E. Second Street Lonoke, AR 72086-2804 855-572-6657 x900
Cabot Public Library	909 W. Main St Cabot, AR 72023-2609 855-572-6657 x01
Carlisle Public Library	105 East 5 th Street Carlisle, AR 72024 855-572-6657 x02
Lonoke Public Library	204 E. Second Street Lonoke, AR 72086-2804 855-572-6657 x03
England Public Library	100 E. Taylor England, AR 72046-2181 855-572-6657 x04

**LONOKE COUNTY LIBRARIES
APPLICATION FOR EMPLOYMENT**

Position you are applying for: _____

Full Name: _____

Address: _____ City, St, Zip _____

Telephone Number: _____ Email: _____

EDUCATION

Education	Location	Date Graduated	Degree
GED/High School			
Associates			
Bachelors			
Masters			
Other			

Library Work Experience:

Computer Knowledge:

Customer Service Experience:

REFERENCES *(no relatives)*

Name	Occupation	Address	Telephone Number

EMPLOYMENT HISTORY

Company Name 1: _____ Telephone number: _____

Address: _____ Salary: _____ per: _____

Dates of Employment: _____ to _____ Reason for Leaving: _____

Name of Supervisor: _____ Job Title: _____

Job Description:

Company Name 2: _____ Telephone number: _____

Address: _____ Salary: _____ per: _____

Dates of Employment: _____ to _____ Reason for Leaving: _____

Name of Supervisor: _____ Job Title: _____

Job Description:

Company Name 3: _____ Telephone number: _____

Address: _____ Salary: _____ per: _____

Dates of Employment: _____ to _____ Reason for Leaving: _____

Name of Supervisor: _____ Job Title: _____

Job Description: