Employment Application

Dixie Regional Library System • 111 North Main Street • Pontotoc, Mississippi 38863www.dixie.lib.ms.usBranch Libraries in: Bruce • Calhoun City • Houlka • Houston • Okolona • Pontotoc • Sherman • Vardaman

The Dixie Regional Library System is an Equal Employment Opportunity Employer and does not discriminate due to race, color, religion, age, sex, or national origin.

ANSWER ALL QUESTIONS IN INK – PLEASE PRINT

	Date of Application				
Name:					
Last	First	Middle	Middle		
Mailing Address:					
Street	City State Zip Code		Zip Code		
Physical Address: (if different)					
Street	City	State	Zip Code		
Phone Number:	e Number:Email				
Best time to contact you is:	ime to contact you is:AM / PM				
Position(s), Type of work applied for:					
How did you find out about this opening?					
Are you available to work: 🛛 🗆 Full Time	□ Part Time □	Nights	nds		
Have you ever been employed with Dixie Region	nal Library System?	🗆 Yes 🗆 No			
If yes, give date:					
Have you previously worked for an entity of the state of Mississippi? If so, are you retired with PERS? Yes No					
Are you currently employed?	□ No				
Name/Relationship of Friends/Relatives Employ	ed here				
Date available for work: /	/ What is your desired salary range?				
Can you travel if the job requires it?	□ No				
Driver's License Number	Issuing State	2	Date Expires		
In case of accident or emergency, please notify:					
Name:					
Address: Phone Number:	Relationship:				

Employment History

Start with most recent.					
Employer:		Emp	Employed From:		To:
Address:		Supervisor:			
Phone:	Hours worked/week:	Hours worked/week: Sta		Starting Salary:	
Position:		Last Salary:			
Primary Duties:		•			
May we contact this employ	ver? Yes No		Supervisor'	s Phone:	
Reason for Leaving:			•		
Reason for Leaving.					
Employer:		Employed From: To:		То:	
Address:		Supervisor:			
Phone:	Phone: Hours worked/week:		Starting Salary:		
Position:		Last Salary:			
Primary Duties:					
May we contact this employer? Yes No Supervisor's Phone:					
Reason for Leaving:					

Professional References (Do not include family or friends.)

	Name and Occupation	Address	Phone Number
1.			
2.			
3.			

Education

Level	Name of School	No. Years Completed	Did You Graduate?	Type of Degree
High School/			Yes	
GED			No	
Undergraduate			Yes	
College or			No	
University			NO	
Graduate/			Yes	
Professional			No	
Other			Yes	
			No	

Do you have any specialized certifications?

Professional Memberships

List all current professional organization memberships below: _____

Answer the questions below. Questions with an "MQ" are Minimum Qualifications for this job. **Every** question with an "MQ" must be answered "YES". If you cannot answer "YES" to every question with an "MQ", you do not qualify for this position. The remaining questions are desirable, but not required, qualifications. It should be noted that those applicants answering "YES" may be considered better qualified for the job. If you answer "YES" to any question followed by blanks, please give examples of your experience.

MQ Have you had experience using a computer □ Yes □ No	?				
Would you rate your computer skills as	□FAIR	□GOOD			
MQ Have you had experience using word processing programs? □ Yes □ No					
Would you rate your word processing skills as	□FAIR	□GOOD	DEXCELLENT		
MQ Have you had experience using spreadshee □ Yes □ No	t program	ms?			
Would you rate your skills in this area as	□FAIR	□GOOD			
MQ Have you had experience using the Internet, email and social media? □ Yes □ No If yes, which program(s)?					
Would you rate your skills in this area as	□FAIR	□GOOD	DEXCELLENT		
Have you had experience planning activities for adults and/or children or working with groups? Yes No					
Do you visit the library	alents, et	Every month tc.?	Several times a year		

Name at least 3 books or 3 magazines you have read in the past year?

Do you have any personal obligations which may interfere with your ability to perform the job?

What do you believe to be your personal strengths and how will they relate to this position?

What do you believe to be your personal weaknesses and how might they affect your performance?

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in my discharge. I understand, also, that I am required to abide by all rules and regulations/policies and procedures of the library system.

Signature of Applicant

Date