Portsmouth Free Public Library
2658 East Main Rd
Portsmouth, RI 02871
401.683.9457 www.portsmouthlibrary.org

You may complete this application or submit a current resume. If submitting a resume, complete any sections of this application that are not addressed in your resume.

Position: _____ **Today's Date:** _____

Last name	First name	M.I.
Street address	City, State	ZIP
E-mail	Phone	

Have you been at this address for at least one year? YES NO

Are you employed now? YES NO

Date available to begin working: Desired hourly rate:

HOURS OF AVAILABILITY

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

The library is open Mon-Wed 9 to 8, Thu-Fri 9 to 6, Sat 9 to 5 and Sun 1 to 5.
The library goes on summer hours Memorial Day through Labor Day; staff schedules change accordingly.

EDUCATION

High School	College	Graduate School
Town/State	Town/State	Town/State
Now enrolled? YES NO Did you graduate? YES NO	Now enrolled? YES NO Did you graduate? YES NO	Now enrolled? YES NO Did you graduate? YES NO

Applicants receiving a conditional offer for employment must obtain and submit a current Rhode Island Bureau of Criminal Identification (BCI) criminal background check from the Rhode Island Office of the Attorney General before final employment is offered. Applicants are responsible for the cost of the BCI report. Failure to provide the required BCI report will remove an applicant from consideration. A criminal record does not automatically disqualify an applicant; however, convictions for offenses that the Library determines to be incompatible with the duties of the position may result in disqualification.

CURRENT/PREVIOUS EMPLOYMENT

Please list your last three employers, starting with the most recent.

Organization/Company	Phone
Address	Supervisor/Contact
Job title	Dates employed
Organization/Company	Phone
Address	Supervisor/Contact
Job title	Dates employed
Organization/Company	Phone
Address	Supervisor/Contact
Job title	Dates employed

PERSONAL REFERENCES Please list three references (no family).

Name	Phone

I certify that the information I have supplied is true and correct to the best of my knowledge and belief.

_____

Applicant Signature and Date

FOR OFFICE USE ONLY

Interviewed by: Date & Time Remarks