

STUDENT EMPLOYMENT APPLICATION

Mexico-Audrain County Library District

305 W. Jackson St.

Mexico, MO 65265

(573) 581-4939 // (573) 581-7510 Fax

The Library District does not discriminate nor deny services on the basis of race, color, national origin, sex, or disability.

Complete Neatly in **BLACK** ink

DATE: _____

NAME _____ PHONE _____

ADDRESS _____

Grade in School _____

Parents' Name (Guardian) _____ Address _____

ORGANIZATIONS AND EXTRACURRICULAR ACTIVITIES:

Are you involved in activities that might interfere with a part-time job?
(explain) _____

Teacher References (list two) _____

PREVIOUS EMPLOYMENT (LIST MOST RECENT FIRST):

Name of Firm	Dates Worked	Employer	Type of Work
_____	_____	_____	_____
_____	_____	_____	_____

Occupational Goal (What you hope to be doing ten years from now) _____

Plans upon graduation: Full-time work ? _____ College? _____ College Major? _____

Starting Date (check when you prefer to start work) Summer _____ Fall _____ Other _____

Transportation (How will you get to work?) _____

Grade Point Average (GPA) _____ (based on a 4.0 scale)

Scheduled work hours are listed.

Please mark the hours that you
would be available to work:

_____ 5:00 – 6:00 p.m.

_____ 6:00 – 7:00 p.m.

_____ 7:00 - 8:00 p.m.

Every Saturday: _____ 8:30 a.m. - 1:00 p.m.

(Please turn to back side of this page)

Parents/Guardian's permission section:

My child _____ has my permission to leave school for one or two class periods if enrolled in school sponsored (COE). I assume full responsibility for the safety and transportation to and from school and work. I will not hold the school, company, and /or coordinator responsible for any accidents during travel or work time. If the child is under the age of 18 has my permission to be employed by a company.

Parents/Guardians Signature _____

Date: _____

Student Signature: _____