



445 North Oates Street  
Dothan, AL 36303  
334-793-9767

535 Recreation Road  
Dothan, AL 36303  
334-699-2950  
www.dhcls.org

### Job Application Form

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Position Applying For: \_\_\_\_\_ Location: \_\_\_\_\_

Name: \_\_\_\_\_ Check One- Age (16-17) : \_\_\_(18+)\_\_\_

Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

#### Education:

High School: \_\_\_\_\_ Grade: \_\_\_\_\_ Graduated: Yes or No

Other: \_\_\_\_\_

#### Work Experience:

1. Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Contact person \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Beginning rate of pay \_\_\_\_\_ Ending rate of pay \_\_\_\_\_

2. Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Contact person \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Beginning rate of pay \_\_\_\_\_ Ending rate of pay \_\_\_\_\_

Have you had any library work experience? Yes/ No If yes, where? \_\_\_\_\_

#### References: (Include both character and work.)

1. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

2. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

3. Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Books or Magazines read recently: \_\_\_\_\_

List software applications proficiencies:

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Do you have any experience working with children? yes/no

If yes, where: \_\_\_\_\_

Do you have any work experience working with the public? yes/no

If yes, where: \_\_\_\_\_

Why should the Dothan Houston County Library System hire you? \_\_\_\_\_

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