

**LIBERTY PUBLIC LIBRARY  
TEEN LIBRARY PAGE APPLICATION**

Thank you for your interest in becoming a Library Page at the Liberty Public Library. Please be advised that the information provided in this application will remain confidential. All information, including list of references and copies of working papers must be complete and submitted **no later than Weds. May 25 at 12:00 noon** in order to be considered for employment.

**Applications can be submitted in the following ways:**

1. Dropped off or mailed to: Liberty Public Library, 189 North Main Street, Liberty, NY 12754
2. Scanned and emailed to [lib@rcls.org](mailto:lib@rcls.org)
3. Faxed to (845)292-5609

**PERSONAL INFORMATION:**

**Name:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Mailing address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Some tasks require heavy lifting and other jobs of a more heavily physical nature. Do you have any physical limitations, which may affect your work?**

\_\_\_\_\_ **Yes**

\_\_\_\_\_ **No**

**If yes, please explain:** \_\_\_\_\_

**SKILLS:**

**Please list your interests, skills and hobbies:** \_\_\_\_\_

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**Tell us about yourself and what interests you about working at the Library?** \_\_\_\_\_

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Please list any Sports or Clubs that you are in \_\_\_\_\_

Do you speak a language other than English? \_\_\_\_ Yes \_\_\_\_ No

If so, what language? \_\_\_\_\_

Which of the following tasks would you be most interested? (check all that apply).

_____ assisting others with computers	_____ working with children
_____ shelving/straightening books	_____ preparing crafts
_____ clean up outdoors	_____ outdoor weeding/gardening
_____ general dusting/cleaning indoors	_____ creating signs & flyers

List all schools you have attended:

School Name	Location	Dates attended	Grade Completed

Employment or Volunteer History:

Place	Title/Duties	Dates Worked	Contact Name/phone

What is the earliest date that you could start work? \_\_\_\_\_

In case of emergency, who should be contacted?

Name: \_\_\_\_\_ Relationship to you \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: (if under 18) \_\_\_\_\_ Date: \_\_\_\_\_

## REFERENCES

Please list the names and contact information for 3 individuals (not family members) who can provide us with more information about your skills and character traits (teacher, counselor, coach, employer, etc)

### Reference 1

Name: \_\_\_\_\_

Relationship to the applicant \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone \_\_\_\_\_

Email \_\_\_\_\_

Mailing address: \_\_\_\_\_

### Reference 2

Name: \_\_\_\_\_

Relationship to the applicant \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone \_\_\_\_\_

Email \_\_\_\_\_

Mailing address: \_\_\_\_\_

### Reference 3

Name: \_\_\_\_\_

Relationship to the applicant \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone \_\_\_\_\_

Email \_\_\_\_\_

Mailing address: \_\_\_\_\_

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