



Harrison County Library System Employment Application

Applicant Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Position Applied for: _____

Library location(s) you are interested in:

☐ ALL ☐ Biloxi ☐ West Biloxi ☐ Margaret Sherry Memorial ☐ Woolmarket ☐ D'Iberville
☐ Gulfport ☐ Orange Grove ☐ Administrative HQ ☐ Pass Christian ☐ Saucier

Full Time ☐ Yes ☐ No Part Time ☐ Yes ☐ No Weekends ☐ Yes ☐ No Nights ☐ Yes ☐ No

Have you ever worked for the library system? ☐ Yes ☐ No If yes, when? _____

Education

LEVEL	SCHOOL NAME/LOCATION	# YRS COMPLETED	DEGREE/AREA OF STUDY
HIGH SCHOOL/GED			
UNDERGRADUATE			
GRADUATE			
OTHER: SPECIALIZED, TRADE			

References

Please list three people we may contact who are familiar with your qualifications.

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

:

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? ☐ Yes ☐ No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? ☐ Yes ☐ No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? ☐ Yes ☐ No

Description

Please comment on anything about yourself – skills, interests, hobbies, memberships, goals, special projects you have undertaken, - that you believe pertinent to your application for employment.

Acknowledgment

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my discharge.

Signature: _____ Date: _____
(Required)

Complete applications are active for one year. Applications may be returned to any library location or mailed to:

Harrison County Library System • Attention: Personnel • PO BOX 2999 • Gulfport MS 39505

Harrison County Library System is an Equal Opportunity Employer and participates in E-Verify.