



Employment Application Form

405 Main Street, Yarmouth, NS B5A 1G3
Telephone: 902-742-2486
Email: officemanager@westerncounties.ca

Name _____

Address _____

Postal Code _____ Telephone _____

Email _____

Please apply for all positions with Western Counties Regional Library in the manner specified. Failure to do so may result in your application not being considered. All applications must include a resume and cover letter.

Position applied for _____

Which Library Branch? _____

Education

	Institution	Year(s) Attended (List years)	Degree(s) and/or Certificate(s) Obtained
College/University			
High School			
Other (special training courses, etc.)			

Volunteer Activities

Please Note: All appointments are on the condition of satisfactory Criminal Records and Child Abuse Registry checks.

Employment History (List most recent job first)

Employer _____
Name Address Telephone

Supervisor _____

Date Employed From _____ To _____ Full Time Part Time Hrs/Week _____

Position Held _____

Duties and Responsibilities _____

Reason for Leaving _____

Employer _____
Name Address Telephone

Supervisor _____

Date Employed From _____ To _____ Full Time Part Time Hrs/Week _____

Position Held _____

Duties and Responsibilities _____

Reason for Leaving _____

Employer _____
Name Address Telephone

Supervisor _____

Date Employed From _____ To _____ Full Time Part Time Hrs/Week _____

Position Held _____

Duties and Responsibilities _____

Reason for Leaving _____

References – You will be required to provide the names of three references with name, address and telephone number if you are called for an interview.

May we contact your present employer? Yes No If No, please explain.

May we contact your previous employer(s)? Yes No If No, please explain.

Family Relationship Disclosure

Please indicate whether the position you are applying for would have you working with a family member. For the purposes of this section, family member includes spouse, child, parent, grandparent, grandchild, sibling, or aunt and uncle as well as a relative permanently residing in your household.

No family relationship Family Relationship

I declare that the information contained in this application is accurate and complete to the best of my knowledge. I understand that failure to provide accurate and complete information may affect my application and/or future employment.

Signature

Date

Revised July 2022
Contact: Office Manager