



319 Garfield Street  
Rolfe, IA 50581

Phone: 712-848-3143  
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Website: <http://www.rolfe.lib.ia.us>

## Application for Employment

Please print neatly and complete all blanks

### PERSONAL

Full Name: \_\_\_\_\_  
First \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last \_\_\_\_\_

Current Address: \_\_\_\_\_  
Number \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Are you 18 years of age or older? Yes  No  Are you a military Veteran? Yes  No   
Are you legally able to work in the United States? Yes  No  If Yes, Dates of Active Duty: \_\_\_\_\_ to \_\_\_\_\_

Have you ever been known by any other name(s) that this company will require to verify any of the information on this application?

### EMPLOYMENT DESIRED

Job Title: \_\_\_\_\_ Date you can start: \_\_\_\_\_ Wage Desired: \_\_\_\_\_

Are you available for work: Full-Time  Part-Time  Temp  Seasonal

### EDUCATION

Do you have a High School Diploma or GED? Yes  No

Name of last school attended: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Circle last year of school completed: 6 7 8 9 10 11 12 13 14 15 16 17 18

Circle the highest degree earned: High School Diploma GED Certificate AA BD MD PHD Other

Area of Concentration and/or degree(s), certificates, licenses, endorsements: \_\_\_\_\_

Other Training or Skills (Factory or Office Machines Operated, Special Courses, Computer Skills, etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_