

APPLICATION FOR TEMPORARY EMPLOYMENT 2025 Library Intern

Lawrenceburg Public Library District 150 Mary St. Lawrenceburg, IN 47025 Updated 4.2025

In compliance with Federal and State equal opportunity laws, qualified applicants are considered for positions without regard to race, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or disability.

NAME Last	First	Middle		
ADDRESS				
CITY				
GENERAL INFORMATION				
Indicate your willingness	/ability to work the follov	wing schedules:		
Part time	Evenings	Weekends		
List volunteer activities and offices held (if applicable)				
Special Skills (Include knowledge of equipment, computer software, Cricut, laminator, etc.)				
If hired, what additional skills would you like to acquire during your internship?				
What LPLD departments interest you?				

EDUCATION & TRAINING

Education/Training	Circle Highest	Institution Name &	Degree/Certificate
	year completed	City	
High School	9 10 11 12		
Business	# months		
	completed		
Correspondence or	# of months		
Vocational	completed		
College	1234		
Other			

EMPLOYMENT/VOLUNTEER HISTORY

(Please start with current or most recent position first)

Place	
Dates	Position
Duties	
Supervisor's Name	
May we contact this employer?	
Place	
Dates	Position
Duties	
Supervisor's Name	
May we contact this employer?	

REFERENCES

Please list three references we could contact. Include their phone number, email, and address for each.

- 1.
- 2.
- 3.

AGREEMENT (Please read before signing)

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

I authorize you to make such investigations and inquiries about my personal employment and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, school, or persons from liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given on the application or in the interview(s) may result in discharge. I understand, also, that I am required to abide by all the rules and regulations of the Lawrenceburg Public Library District.

Date	Signature
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