Blanco County South Library District

James A. and Evelyn Williams Memorial Library
1118 Main Street

Blanco, Texas 78606

TELEPHONE (830) 833-4280 FAX (830) 833-2680



Part-Time Library Aide Application Form 2024

First Name	Last Name	Date of Birth (dd/mm/yyyy)
Driver's License #/State ID#	State	Expiration Date
Mailing Address	Apartment/Unit #	City, State, Zip Code
Phone #	Alternate Phone #	Email Address

Check Yes or No to mark your Answer:		
Do you have the legal right to work permanently in the United States?	Yes	No
Have you ever been convicted of a felony?	Yes	No
Are you at least 18 or older?	Yes	No
Do you have a High School degree/GED/or higher?	Yes	No
Fluent in Spanish?	Yes	No
This position sometimes requires physical activities such as lifting above your head, lifting up to 40 pounds, bending, kneeling, and similar activities. Are you able to perform these with reasonable accommodations?	Yes	No

Describe any special skills and proficiencies you have that would help in this position. (300 word	limit)

Employment History				
List your last three employers in	chronological order with the most re	cent at the	e top.	
For Dates, an approximate month	and year is acceptable.			
Company or Employer Name	Address	Phone #	<u>!</u>	
Job Title	Dates	Reason	for leaving	
Company or Employer Name	Address	Phone #	<u>!</u>	
Job Title	Dates	Reason	for leaving	
Company or Employer Name	Address	Phone #	<u> </u>	
Job Title	Dates	Reason for leaving		
Have you been fired or asked to	resign from a job within the last five	years?	Yes	No
If Yes, please explain:				

References		
Name	Organization (if applicable)	Phone #
Relationship	Phone #	Email if phone # is not available

Name	Organization (if	applicable)	Phone #
Relationship	Phone #		Email if phone # is not available
Name	Organization (if	applicable)	Phone #
Relationship	Phone #		Email if phone # is not available
Date when you are ava	dable for employment		
Date when you are ava	mable for employment:		
	Pre-Employm	nent Statement	
that any false informati		cealment of fac	and complete. I understand and agree et is sufficient grounds for either my the Blanco Library.
Library, and my emplo without notice, at any t representative of the Bl	yment and compensation can ime, at the option of either th anco Library, other than the	be terminated of the Library or my District Board of	s and regulations of the Blanco with or without cause, and with or yself. I understand that no manager or of Trustees, has any authority to enter e, or to make any agreement contrary
I understand that by sul	omitting this application, I an	n not guarantee	d the job.
Signature:			
Date of submission:			

Mail your completed application by November 15th and a copy of your resume to:

Library Aide Applications

1118 Main St.

Blanco, TX 78606

OR

Email application and resume to: hiring@blancolib.org

Office use only		
Date Received:		