

## **Application for Page Position**

intormation	:						
Name:	(last)		(first)		(middle initial)		
Address:							
Address	dress:(street)		(town)		(	zip code)	
E-mail:			Phone 1:		Phone 2:		
In case of emergency, please contact:					Phone: _		
If applicable Grade:		School: _					
Do you have	experience w	th any of the Yes	following: No	<u>Comment</u>	·c		
Dewey Decir Computers Computer So	•	<u>163</u>	<u>NO</u>	comment	<u>.3</u>		
Special Inter							
Availability:		•	re available to		Fuiday	Catumday	Cundou
Library hrs	Monday 9-9	Tuesday 9-9	Wednesday 9-9	Thursday 9-9	Friday 9-5	Saturday 9-5	Sunday 2-5
Hours available	33	3 3	3 3	3 3	33	33	23
	On the back or rences, such a		ion please give nployers, etc.	the name, ad	dress and pho	ne number of	two personal
Applicants si	ignature:		Date:				
Students wo students mu	•	rary will be re of age or olde	under): sponsible for for r to work after	•	•	_	
Name of Par	ent or Guardia	ın:					
Signature of	Parent or Gua	rdian:			Date:		