



Wadsworth Public Library Foundation

132 Broad Street, Wadsworth, OH 44281 | 330-335-1299 | www.wadsworthlibrary.com/foundation

Please print

Last Name	First Name	Middle Initial	Today's Date
Street address			Home Phone
City, State, Zip			Business Phone
E-mail address			Cell Phone

Educational Record

	NAME OF SCHOOL	COURSE OF STUDY	YEARS ATTENDED		YEARS COMPLETED			
			From	To	1	2	3	4
High School								
College								
Other (Specify)								

Employment Record

Name of employer	From: Month ____ Year ____	Position held
Address (City & State)	To: Month ____ Year ____	Responsibilities
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Address (City & State)	To: Month ____ Year ____	Responsibilities
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Address (City & State)	To: Month ____ Year ____	Responsibilities

Hobbies and interests

Community Activities

Please explain why you are interested in becoming a member of the Foundation board of trustees. (Use the back of this application if needed.)

I verify that all information on this application is correct.

Signature

Date