

MINISTRY OF EDUCATION NATIONAL LIBRARY & INFORMATION SERVICES | UNESCO

William Committee Control Cont







		Applicall	illiorillation			
Full Name:					Date:	
	Last	First		M.I.		
School:						
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Age:						
Age.						
Phone:			Email			
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Graduation	Date:		-			
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	be willing to make Librarianship y			_		
If yes, why?	:					
List your into	erests:					
Are you inve	olved in any extracurricular activi	ities (e.a. com	munity church or scho	nol activities)	Yes	No
	es:			or activities)	103	110
LIST ACTIVITIE	S					

Vhat other courses have	you taken other than in school?		
Please indicate which con	nputer skills you possess		
Vord	PowerPoint	Excel	Access
Publisher	Internet Research	FaceBook	Instagram
Graphic Design? Y I	N If yes, which program are ye	ou familiar with?	
Other			
Do you like helping peopl	e?		
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- Do you enjoy researching	j information when doing your proje	ects for school?	
- Do you enjoy researching	g information when doing your proje	ects for school?	
	g information when doing your proje		
Do you like to read?			
Do you like to read?			
Do you like to read?	s do you enjoy?		
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Do you like to read? If so, what types of books Have you assisted in a lib Are you willing to abide b	orary before?	orary?	
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