El Dorado Union High School District Application for Employment

El Dorado Union High School District is an Equal Opportunity Educational Institution committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

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| --- | --- | --- | --- | --- |
| **Name (Last, First, Middle)**: | | | |  |
| **Street Address**: | | | **City, State & Zip**: |  |
| **Social Security Number:** | **Home Phone**: | | **Work Phone**: | **Other Phone**: |
| **Are you currently employed**? | | Yes   No | **If YES, please list your job title and employer**: | |
| **Have you ever been terminated from or asked to leave a job**? | | Yes No | **If YES, dates of employment & reason for leaving**: | |

## EDUCATION Year Graduated

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of High School**: |  |  | |
| Name of College: |  | **Degree Earned:** | **Credential Earned**: |
| **Name of College**: |  |  |  |
| Name of College: |  |  |  |



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| **Other credentials/ licenses/ professional affiliations, etc., which are relevant**. |

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| * What sets you apart from other candidates seeking this position? |

**WORK EXPERIENCE**-Please detail your work history. Begin with your current or most recent employer. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. **PLEASE DO NOT** complete this information with the notation “See Resume.”  **PLEASE NOTE**: El Dorado Union High School District reserves the right to contact all current and former employers for reference information.

|  |  |  |
| --- | --- | --- |
| Dates Employed (next recent position)  From:       To: | Full time  Part-time  If part-time, # hrs./wk: | Title: |
| Salary: | Organization Name and Address: | |
| Supervisor’s Name, Title and  Phone #: |
| Reason for leaving: | | |

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| --- | --- | --- |
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| Supervisor’s Name, Title and  Phone #: |
| Reason for leaving: | | |

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| --- | --- | --- |
| Dates Employed (next recent position)  From:       To: | Full time  Part-time  If part-time, # hrs./wk: | Title: |
| Salary: | Organization Name and Address: | |
| Supervisor’s Name, Title and  Phone #: |
| Reason for leaving: | | |

Contact my current references:

At any time

Only if I am a finalist candidate

**PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.**

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Debra Pearson, to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of El Dorado Union High School District serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the El Dorado Union High School District Retirement System or to an optional retirement program, if applicable. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_