

Were you in U.S. Armed Forces? Yes No If yes, what Branch? _____
 Dates of duty: From _____ To _____ Rank at Discharge _____
 Job related training received in military: _____

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

EMPLOYMENT EXPERIENCE (Please start with present or most recent employer.)

Employer	Dates Employed		Work Performed
	From	To	
Address			
	Hourly Rate/Salary		
Job Title	Supervisor		
Telephone Number(s)	May we contact?		
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
	Hourly Rate/Salary		
Job Title	Supervisor		
Telephone Number(s)	May we contact?		
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
	Hourly Rate/Salary		
Job Title	Supervisor		
Telephone Number(s)	May we contact?		
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

Special job-related skills, training, qualifications acquired from employment or other experience _____

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Agency.

Signature of applicant _____ Date _____

Prior to employment with the Clarke Community School District to perform a safety-sensitive function a pre-employment drug test is required with negative results. Acknowledgement _____ applicant _____ interviewer