

#### **APPLICATION FOR A SUPPORT STAFF POSITION**

601 W. Burkhart St Malden, Mo 63863

The Malden School District considers applicants for all positions without regard to race, color, religion, sex, national origin or disability. If you have a disability or handicap which may require accommodation for you to participate in our application process (including filling out this form, interviewing or any other pre-employment procedure or requirement), please make us aware of any accommodation you feel is necessary. If you have any inquiries, complaints or concerns about any pre-employment procedure or requirement, including completing this application, or about the District policy of non-discrimination, you may contact the Superintendent at 573-276-5794.

All applicants are expected to answer all questions on this application. Answer "none" or "not applicable" where necessary.

Date

Last Name First Name Middle Name Social Security Number

Other names that may appear on your transcripts or records:

Current Address

City

State

Zip Code

Phone Number

**Desired Position:** 

Skills you posses pertaining to the position(s) for which you are applying:

# Dates of GPA Name and Location Attendance Major Degree High School College or University College or University Business/ Trade School

## Are you able yo lift 50 pounds without assistance?

## Work Experience

Employer and Location	Position	Dates of Employment	Number of Years	Supervisor	Phone
		Employment		Cuperviser	1 Hone

# <u>References</u>

Name	Address	Position	Phone

### **Employment Questions:**

- 1. Have you ever been arrested for, or charged with or convicted of a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)
- 2. Have you ever pleaded guilty or no contest to a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00).
- 3. Has the Missouri Division of Family Services or a similar agency in any other state or jurisdiction, ever issued a determination or finding of cause or reason to believe or suspect that you have engaged in physical, emotional, psychological or sexual abuse or neglect of a child?
- 4. Have you ever failed to be re-employed by an educational institution?

If the answer to any of the foregoing questions is "yes" please explain; use a separate sheet if necessary:

## APPLICANT QUESTIONS

Name:

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1. Why have you chosen the position for which you are applying as your profession?

2. Describe how you would be able to help the students in our school district.

3. Write a brief autobiography focusing on the important people and events in your life.

## READ CAREFULLY BEFORE SIGNING

I acknowledge and agree to the following provisions as conditions to consideration of my application for employment:

- I hereby authorize my current and former employers and references to furnish any information about me and about my work experience. I release my current and former employers and references from any and all liabilities or damages of any nature as a result of providing such information. My current and former employers and references may rely on a signed copy of this release.
- 2. I understand and consent to having criminal and arrest records checks as well as background checks by the Missouri Division of Family Services as a condition for consideration of my application for employment.
- 3. I certify that the answers given in this application are true and complete to and in the further event that I have provided false or misleading information in this application or in subsequent employment interviews, I understand that my employment may be terminated at any time after discovery of the false or misleading information.
- I understand that this application will be considered active through April 30th.
  I understand that if I wish my candidacy to remain open after that date I must submit another application.
- 5. I understand that my employment is contingent upon a criminal history background check. If for any reason this background check should come back with questionable information, by law, I understand that my employment will be immediately terminated.

Signature

Date

This form must be signed and dated in order to validate this application.

Do Not Write Below This Line - For Adr	ninistrative Use Only				
Date received: Application	Credentials	Transcripts			
Date interviewed:					
Date and time: Applicant notified					
Date and time: Applicant accepted					
Position offered:					
Salary step and level:					