



Jayhawk Unified School District #346

414 S. 5th St., P.O. Box 278, Mound City, KS 66056
(913) 795-2247

Date of Application _____

Application for Classified Personnel

Name _____
(Last) (First) (Middle)

Address _____ Contact Number: _____
 Home Cell
Email: _____

Position(s) applying for:(indicate what type of position you are interested in) _____

Date of candidate's availability for position _____

Personal References (Not Former Employers or Relatives)

1. Name _____ Address _____ Phone _____
2. Name _____ Address _____ Phone _____
3. Name _____ Address _____ Phone _____

Present and Past Employment (Begin with Most Recent)

1. Employed by _____ Type of Business _____
Dates Employed _____ Wage _____ Supervisor _____
2. Employed by _____ Type of Business _____
Dates Employed _____ Wage _____ Supervisor _____
3. Employed by _____ Type of Business _____
Dates Employed _____ Wage _____ Supervisor _____

An Equal Employment/Educational Opportunity Agency

Jayhawk USD #346 does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The Superintendent of Schools, 414 S 5th Street, Mound City, KS 66056 (913-795-2247) has been designated to handle inquiries regarding non-discrimination policies

APPLICANT JOB APPLICATION ACKNOWLEDGMENTS

1. I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.
2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.
3. I authorize you to request, receive, and verify all information given on this application and I release you from all damages that may result from your doing so.
4. I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation, and I release you from all liability for any damages that may result from your doing so.

Signature of Applicant

Date

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