

SUPPORT PERSONNEL APPLICATION



CHEYENNE PUBLIC SCHOOLS

PO BOX 650

CHEYENNE, OKLAHOMA 73628-0650

www.cheyenne.k12.ok.us

DATE _____

NAME _____
LAST FIRST MIDDLE

POSITION DESIRED _____

NONDISCRIMINATION STATEMENT – THE CHEYENNE PUBLIC SCHOOL SYSTEM DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, QUALIFIED HANDICAP OR VETERAN.

CHEYENNE PUBLIC SCHOOLS

AN EQUAL OPPORTUNITY EMPLOYER

Name _____

Mailing Address _____ Phone _____

Street Address _____ Alternate Phone _____

City _____ State _____ Zip Code _____ How long at this address? _____

Date of Birth _____ Are You a Citizen of the U.S.A.? _____

Hobbies-Sports-Special Interests _____

Name Relatives or Friends Working for this District _____

Referred to this District by _____ Friend _____ Relation _____

In Case of Emergency Notify _____ Relationship _____

Street Address _____ City _____ State _____ Phone _____

Have You Ever Been Convicted of a Crime (Other than Traffic Violation) Yes _____ No _____

If Above answer is "YES" – Explain _____

Do You Have Any Physical Impairment That Would Interfere With Your Performance in the Position for Which You are Applying?

LIST NAMES OF TWO REFERENCES (NOT RELATIVES) TO WHOM WE MAY REFER

| NAME | OCCUPATION | ADDRESS | PHONE |
|------|------------|---------|-------|
| | | | |
| | | | |

EDUCATION

| | Name & Location of School | Date Graduated | No. of Years Attended | Type of Course |
|--------------------------|---------------------------|----------------|-----------------------|----------------|
| Elementary School | | | | |
| High School | | | | |
| College | | | | Degree |
| Trade or Business School | | | | |

EMPLOYMENT HISTORY
(COVER AT LEAST LAST FIVE YEARS)

| NAME & ADDRESS OF EMPLOYER | DATE Month-Year | POSITION | SALARY | REASON FOR LEAVING |
|--|--------------------|----------|--------|--------------------|
| Name _____ Address _____ _____ Supervisor _____ | From To | | | |
| Name _____ Address _____ _____ Supervisor _____ | From To | | | |
| Name _____ Address _____ _____ Supervisor _____ | From To | | | |
| Name _____ Address _____ _____ Supervisor _____ | From To | | | |
| Name _____ Address _____ _____ Supervisor _____ | From To | | | |

CHEYENNE PUBLIC SCHOOLS

AN EQUAL OPPORTUNITY EMPLOYER

Have You Ever Worked With Children? _____ If so Where? _____

Have You Ever Driven a Bus? _____ If so for Whom? _____

Do You Have a Current CDL? _____ Expiration Date _____

AGREEMENT

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL WITHOUT NOTICE AT ANY TIME DURING MY EMPLOYMENT.

I AGREE, IF EMPLOYED, TO FOLLOW ALL RULES AND REGULATIONS OF THE DISTRICT.

I AGREE TO PROMPTLY NOTIFY THE DISTRICT OF ANY CHANGE OF ADDRESS DURING MY EMPLOYMENT.

DATE _____ SIGNATURE _____