USD #398 Classified Staff Application Form

Unified School District #398 506 Elm Street Peabody, KS 66866

Phone: 620-983-2198 Fax: 620-983-2247

Position desired:		
(Last)	(First)	(Middle)
Residence Address:		
Phone:	Home email:	
Date Available:		
PERSONAL/PROFESSIONAL IN	IFORMATION	
Are there any reason(s) that would	prevent you from performing	the essential job duties of this
position? yes no	If so explain:	
Have you ever been convicted of a	crime involving moral turpitu	ide of any type?
yes no If so explain: _		
Have you ever failed a drug test of	any type?	
yes no If so explain: _		
Have you ever been terminated or	asked to resign from a past job	o?
yesno If so explain:		
Have you ever been put on adminis	strative leave from a past job?	
yesno If so explain:		
Valid KS driver's license:y	yes no	
Kansas CDL-P&S Endorsement: _	yes no	

Work history: List last position first:

School or Company	Years	Assignment	Supervisor	Salary Range

Education: List last degree, diploma or certificate obtained first:

School/Training Institution	Location of University	Dates Attended	Degree or Certificate Earned/GPA

List three professional references that are familiar with your work, and one personal reference that knows you outside of work. Include current addresses and a daytime telephone. Do not include relatives.

<u>Professional</u>	
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<u>.</u>	
Personal	
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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 authorized 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.

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Signature of Applicant		Date	