

ANDREW COMMUNITY SCHOOL DISTRICT APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer
Pre-Employment Drug Test May Be Required

All applicants are considered without regard to race, color, gender, religion, national origin, age, marital or veteran status, mental or physical disability unrelated to job performance or any other legally protected status.

POSITION APPLYING FOR: _____ DATE: _____

PERSONAL INFORMATION

Legal name: First _____ Last _____ Middle Initial _____

Address: Street _____ City _____ State _____ Zip code _____

Home Telephone: _____ Other Telephone: _____

E-mail: _____ Social Security #: _____

Are you legally eligible for employment in the United States? Yes No

United States Visa status, if applicable: _____

Have you been convicted of a felony? Yes No

If yes, please explain circumstances: _____

Are you at least 18 years old? Yes No

Certifications/Licenses/Other Skills to consider for this position:

EMPLOYMENT HISTORY *(Most recent first)*

1. Job Title:		Duties:	
Employer:			
Dates of Employment (month / year) From: To:			
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp	
Employer's Address:			
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			
2. Job Title:		Duties:	
Employer:			
Dates of Employment (month / year) From: To:			
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp	
Employer's Address:			
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			
3. Job Title:		Duties:	
Employer:			
Dates of Employment (month / year) From: To:			
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temp	
Employer's Address:			
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			

EDUCATION

Type of school	Name and Location	Dates Attended	Degree Received	Subjects Studied	Did you graduate?
High School					
College / University					
Graduate School					
Tech School					
Other					

SKILLS

Clerical / Office skills		
Computer skills	Name of software:	<input type="checkbox"/> PC <input type="checkbox"/> Mac <input type="checkbox"/> WPM
Languages		
Other special knowledge or skills		

Please describe any other experience, abilities or skills that might be helpful in considering your application: _____

REFERENCES-Please list three references with address and phone number who are not related to you and are not previous employers.

CERTIFICATION & AUTHORIZATION

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or omissions of facts in this application are grounds for disqualification from further consideration or for dismissal from employment.

I authorize the company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position.

If employed, I agree to conform to the rules, regulations and policies of the company. I understand that I will be an employee "at will" and either the company or I may terminate my employment relationship at any time for any reason not in violation of law.

I hereby acknowledge that I have read and fully understand the forgoing and seek employment under these conditions.

Signature of Applicant

Date