

# USD 284 CLASSIFIED PERSONNEL EMPLOYMENT APPLICATION

**Note:** Please print or complete electronically. Complete and orderly applications are preferred.

Date This Application Was Completed: \_\_\_\_\_

NAME: \_\_\_\_\_  
Last
First
Middle

ADDRESS: \_\_\_\_\_  
Number and Street
City
State
Zip

HOME TELEPHONE: \_\_\_\_\_ BUSINESS TELEPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Are you over the age of 18?       yes       no

Do you hold a valid driver's license?  yes       no       State       type

## EMPLOYMENT DESIRED

USD 284 Non-Certified Position Applied for: \_\_\_\_\_

Start Date: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Employed Now:  yes       no      If so, may we enquire with employer?  yes       no

## EDUCATION

	Name	Location	Dates Attended	Diploma / Degree
High School				
J. C., College or University				
Vocational or Trade School				
Other				

## WORK EXPERIENCE

**Note:** Please list entire and complete work history

Firm	Location	Phone No.	Duties	Start Date	End Date	Start Pay	End Pay	Reason for Leaving	Supervisor

## REFERENCES

**Note:** Please list a minimum of 4 references who are not related to you.

Name	Professional or Personal	Firm and/or Address	Position	Home Phone	Cell Phone

## AGREEMENT

I agree to the following:

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, terminated.
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.
3. I authorize any background checks by any third party.
4. 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.
5. I authorize you to conduct a criminal background and/or drug test investigation using any and all methods necessary to successfully complete such investigations and I release you from all liability for any damages that may result from doing so.
6. I agree to observe all rules, regulations and policies of the district now in force and effect or as they may change during my employment if I am hired by the district.
7. I understand and agree that my employment may require a criminal history background check and that any offer of employment is conditional and subject to termination, without further proceedings and without reference to any other law or contractual agreement, if the results of the criminal history records check reveal that I have been convicted of any offenses specified in law.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date