



ST.ANDREW'S  
SEWANEE

## APPLICATION FOR EMPLOYMENT

St. Andrew's-Sewanee School (SAS) is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, pregnancy, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally protected basis under federal, state, or local laws, regulations or ordinances. The information collected by this application is solely to determine suitability for employment, verify identity, and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the Americans with Disabilities Act. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on SAS. Please inform an SAS representative if you need assistance in the application process.

### GENERAL INFORMATION

Full Name _____			Date _____	
FIRST	MIDDLE	LAST		
Address _____				
STREET		CITY	STATE	ZIP CODE
Contact Number (____) _____			Date available for work _____	
Alternate Contact Number (____) _____			E-mail _____	
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you now, or will you in the future, require immigration sponsorship for work authorization (e.g., H-1B)? <input type="checkbox"/> Yes <input type="checkbox"/> No (If hired, verification will be required consistent with federal law.)				
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, you may be required to provide authorization to work.)				
How were you referred to SAS? _____				

### POSITION INFORMATION

Type of work desired? _____	Salary range expected (required) _____
Applying for: <input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal

AN EQUAL OPPORTUNITY EMPLOYER

## EDUCATION

Type of School	School Name and Location	Highest Grade Completed	Major Courses of Study and Degree Granted
High School or G.E.D. equivalent		9 10 11 12/GED	
College or University		1 2 3 4	
Vocational or Trade School			
Graduate School			
Other (including military training)			

## BACKGROUND INFORMATION

During the past ten years, have you ever been discharged, suspended, or asked to resign from any position?  
 Yes    No   If yes, please explain. \_\_\_\_\_

For the purpose of verifying information on this application, have you ever worked or attended school under a different name at any of the organizations you have listed?  
 Yes    No   If yes, specify name. \_\_\_\_\_

## PROFESSIONAL REFERENCES

List three professional references (other than those listed as current/former supervisors) that we may contact:

Name _____	Telephone No. ( ) _____
Email Address _____	Type of Acquaintance _____
Name _____	Telephone No. ( ) _____
Email Address _____	Type of Acquaintance _____
Name _____	Telephone No. ( ) _____
Email Address _____	Type of Acquaintance _____

## EMPLOYMENT RECORD

List all employment experience for the past ten years, starting with the most recent or present employer, including U.S. Military Service. Using a separate section for each position and use a separate sheet of paper if need be. **You may include as part of your employment history any verified work performed on a volunteer basis. Resumes may not be substituted in lieu of completing the following employment information.**

Current Employer _____ Location _____ Your Position _____ Supervisor's Name/Title _____ _____ May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, why? _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ <div style="text-align: center;">Month                      Year</div> To _____ <div style="text-align: center;">Month                      Year</div> Reason for Leaving _____ _____
Employer _____ Location _____ Your Position _____ Supervisor's Name/Title _____ _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ <div style="text-align: center;">Month                      Year</div> To _____ <div style="text-align: center;">Month                      Year</div> Reason for Leaving _____ _____
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Employer _____ Location _____ Your Position _____ Supervisor's Name/Title _____ _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ <div style="text-align: center;">Month                      Year</div> To _____ <div style="text-align: center;">Month                      Year</div> Reason for Leaving _____ _____

Have you worked for SAS before?    If yes, when? \_\_\_\_\_ Job title: \_\_\_\_\_

Please account for any gaps of employment longer than a month. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## ADDITIONAL COMMENTS

Please comment on how your prior education and experiences qualify you for the type of employment you are seeking. Detail any past responsibilities and achievements. Note any special coursework, honors, activities, special projects, or any other information that will assist us in considering your application for employment.

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**IF APPLYING FOR A TEACHING POSITION,  
EXPLAIN YOUR TEACHING PHILOSOPHY BELOW (or include attachment):**

**PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING**

I have disclosed all information that is relevant and should be considered applicable to my candidacy for employment.

\_\_\_\_\_ Initials

I understand that I may be subject to a pre-employment drug test after receiving a conditional offer of employment and must receive a negative result for illegal drug use before being permitted to work with SAS.

\_\_\_\_\_ Initials

I understand that I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background and driving record and other matters related to my suitability for employment. I understand that a separate disclosure and consent form will be provided to me prior to any background check.

\_\_\_\_\_ Initials

I hereby certify that the information given by me is true in all respects. I authorize SAS and its representatives to contact my prior employers (with the exception of my current employer, only if I have marked "May we contact?" in this application as "No") for the purpose of verification of the information I have supplied and release the same from any liability resulting from the information released. I authorize employers, schools and other persons named on this application to provide any information or transcripts requested.

\_\_\_\_\_ Initials

I understand employment with SAS is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

\_\_\_\_\_ Initials

I expressly understand and agree that, if employed, my employment, having no specified term, is based upon mutual consent and may be terminated at will, with or without cause, by either party (SAS or me) with or without prior notice to the other, unless otherwise prohibited by law.

\_\_\_\_\_ Initials

I understand that no representation, whether oral or written, by any representative of SAS, at any time, can constitute an implied or express contract of employment. I further understand no representative or agent of SAS has the authority to enter into an agreement for employment other than in a document signed by the Head of School or an authorized representative.

\_\_\_\_\_ Initials

I certify that all of the above information is true and complete, and I understand that any falsification or omission of information may disqualify me from further consideration for employment or, if hired, may result in termination regardless of the time elapsed before discovery.

\_\_\_\_\_ Initials

Note: An offer of employment is conditioned upon complying with SAS's requirements including, but not limited to, signing a separate disclosure and consent form prior to any background investigation.

MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

Applicant's signature \_\_\_\_\_

Date \_\_\_\_\_