



ALUM ROCK UNION ELEMENTARY SCHOOL DISTRICT

2930 Gay Avenue, San José, CA 95127 · Phone: 408-928-6800 · Fax: 408-928-6401 · www.arusd.org

APPLICATION FOR EMPLOYMENT-CLASSIFIED

IMPORTANT INSTRUCTIONS: Please print in Ink or Type. Answer all questions completely.

NOTE: APPLICATION MUST BE SIGNED.

Name _____
FIRST MIDDLE LAST

Current Address _____
STREET CITY STATE ZIP CODE

Permanent Address _____
STREET CITY STATE ZIP CODE

Home Phone (_____) _____ - _____ Message Phone (_____) _____ - _____
AREA CODE AREA CODE

Work Phone (_____) _____ - _____ Social Security # _____ - _____ - _____
AREA CODE

Email Address: _____

Title of position for which applying: _____ Part-Time Full-Time

Posting #: _____ School/Department: _____

Please answer all the following questions.

- Do you have a valid California Driver's License? Yes No
If you are under 18 years of age, can you submit a work permit? Yes No
- Can you, upon employment, submit verification of your legal right to work in the United States? Yes No
(Proof of citizenship or immigration status will be required upon employment)
- Have you been employed with Alum Rock before? Yes No
If yes, give title and date, or if currently employed with Alum Rock indicate title and work hours.
Title: _____ Date: _____
Work Hours: _____
- Have you ever been convicted of a crime, other than a minor traffic violation? Yes No
If yes, please use the space below (#8) to explain the nature of the crime(s), when and where convicted, and disposition of the case(s).
- Have you ever been dismissed from employment due to misconduct or unsatisfactory service or resigned to avoid dismissal? Yes No
If yes, please give details in the space provided in #8 to explain.
- Are you able to perform the essential functions of the job for which you are applying? Yes No
If no, use the space provided in #8 to describe the functions that cannot be performed and what can be done to accommodate the limitation(s).
- Do you speak, read and write a language other than English? If yes, please rate yourself. Yes No
Language: _____

1 2 3 4 5
NON-PROFICIENT PROFICIENT

8. Please use this space for explanation to questions 4-6. (Use additional sheets of paper, if necessary.)

Computer Macintosh Personal Computer

List software package(s) in which you are proficient:

1.	_____	4.	_____
2.	_____	5.	_____
3.	_____	6.	_____

Professional Experience

Please provide below details regarding your experience as listed on your application.

Extra-Curricular Interest And Related Information

Please provide below information that may be directly or indirectly related to your professional background. Suggestions: athletics, art, drama, musical ability, newspaper, bilingualism, reading skills, experiences, etc.

Employment Experience

Begin with your present or most recent job and account for **ALL** time during the past ten years. Verifiable voluntary experience will be considered if job related. If additional space is needed, please duplicate this sheet. **NOTE: A RESUME WILL NOT BE ACCEPTABLE AS A SUBSTITUTE FOR COMPLETING THIS SECTION**

Employer Name and Address	Dates	Position Held & Description of Job			
Name	From				
Address					
City/State/Zip	To				
Supervisor/Title					
Phone#	Reason for Leaving:				
Name	From				
Address					
City/State/Zip	To				
Supervisor/Title					
Phone#	Reason for Leaving:				
Name	From				
Address					
City/State/Zip	To				
Supervisor/Title					
Phone#	Reason for Leaving:				
Name	From				
Address					
City/State/Zip	To				
Supervisor/Title					
Phone#	Reason for Leaving:				
Name	From				
Address					
City/State/Zip	To				
Supervisor/Title					
Phone#	Reason for Leaving:				

Education

Name of Colleges, Universities, and other Schools attended	Semester	Quarter	Type of Degree Program	Degree Awarded		Date
				Yes	No	

Number of semester units of graduate work beyond BA/BS degree: _____

Employment References *(Include only those who have knowledge of your work experience such as your immediate supervisors.)*

Name	Position	Address	Work Phone	Home Phone

I HEREBY CERTIFY that all statements herein are true and correct to the best of my knowledge. I understand that false statements shall be sufficient cause for dismissal or disqualification from employment consideration. I release from all liability persons and organizations reporting information required by this application.

I hereby authorize representatives of Alum Rock Union Elementary School District to contact (unless otherwise noted) organizations (including employers and schools) and individuals listed for the purpose of establishing or verifying my qualifications, work history, and work habits in connection with this application for Alum Rock Union Elementary School District. I understand and acknowledge that such information will be used confidentially for the purpose of employment decisions only. It will not become part of my personnel record once I am employed and will not be available for review by me.

Date Available for Employment

Signature

Date

Please return to: Human Resources Division
Alum Rock Union Elementary School District
2930 Gay Avenue
San Jose, CA 95127
(408) 928-6507

For District Use Only: Received Accepted Reason for Denial: Education Experience Late Filing Other _____
Postmarked Not Accepted Credential Analyst: _____ Date: _____

AFFIRMATIVE ACTION/EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER