

Application of Employment

Spartanburg Day School is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, age, sex, religion, nation origin, pregnancy, handicap, disability, veterans status, or citizenship.

(Please print)	Date of Application:				
Name:	Last	First		MI	
Address:	Street	City		State	Zip
Telephone:	Home	Cell		Business	
Email:			_	Dusiness	
Position Desired:				(Circle one):	Part-time Full-time Other
Date Available: Have you ever ap	plied for a position with us?		Yes	If "Yes", when?	Other
Have you ever be	en employed by us?		No Yes No	If "Yes", when?	
Do you have a rel	ative working here?		Yes No	If "Yes", who?	
Are you currently	employed?		Yes No		

EDUCATIONAL DATA						
Print name, Number & Street, State & Zip for	Number of Years	Degree Name &	Major Course of			
Each School Listing	Completed	Year	Study			
	Print name, Number & Street, State & Zip for	Print name, Number & Street, State & Zip for Number of Years	Print name, Number & Street, State & Zip for Number of Years Degree Name &			

PREVIOUS EMPOYMENT

In the following spaces, give a complete record of your employment including period of unemployment, if any. Begin

with your most recent employment	nt and work back. If additional space is needed, please	e continu	ie on a separate s	heet.	
MOST RECENT EMPLOYER					
Date: Month and year	Print name, Number & Street, City, State, & Zip		Salary	Last Title/ Position	
From:					
_					
To:					
Immediate Supervisor's Name and Phone			Other Positions Held:		
Duties:					
Reason for Leaving:					
Date: Month and year	Print name, Number & Street, City, State, & Zip		Salary	Last Title/ Position	
From:					
	1				
То:					
Immediate Supervisor's Name and Phone			Other Positions Held:		
Duties:					
Reason for Leaving:					
Date: Month and year	Print name, Number & Street, City, State, & Zip)	Salary	Last Title/ Position	
From:					
	1				
То:					
Immediate Supervisor's Name and Phone			Positions Held:		
Duties:					
neason for Learning.					

ADDITIONAL INQUIRIES CONCERNING PREVIOUS EMPLOYMENT

(In response to these inquiries, continue on a separate sheet if you require additional space).

1. Have you ever been dismissed or forced or asked to resign from any employment? If you answered "Yes" to the above, please explain.

OTHER SPECIAL SKILLS

Are there any other experiences, skills, or qualifications you feel would especially support your application tor employment with Spartanburg Day School?

REFERENCES

List three individuals. DO NOT include relatives or former employers.

Name	Occupation	Address	Phone Number	How Long Known		
GENERAL INFORMATION						
1. Are you over 18 years of age? :						
2. Have you ever been convicted of a felony? :						

(An affirmative response will not necessarily disqualify you from the job for which you are applying. Each conviction will be

judged on its own merits with respect to time and job relatedness.)

If you answered "Yes", please explain. :

Yes

No No

APPLICANT'S STATEMENT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered on a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons or corporations requesting or supplying such information. I understand that in the event I am offered employment with the School, that I may be required, as a condition of employment, to submit to a physical/ health examination. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event that I am hired.

I hereby agree to submit to any lawful drug testing that may be required as a condition of employment or continued employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge.

IMPORTANT. I UNDERSTAND THAT MY EMPLOYMENT IS TERMINABLE-AT-WILL, THAT I AM NOT BEING EMPLOYED FOR ANY SPECIFIC TIME, AND THAT THIS APPLICATION IS NOT AND IS NOT INTENDED TO BE A CONTRACT FOR EMPLOYMENT FOR ANY DEFINATE PERIOD OF TIME. I UNDERSTAND THAT NO REPRESENTATIVE OF THE SCHOOL, OTHER THAN THE HEADMASTER, HAS THE AUTHORITY TO BIND THE SCHOOL TO ANY EMPLOYMENT CONTRACT FOR ANY SPECIFIED PERIOD OF TIME, EITHER VERBALLY OR IN WRITING. THE ONLY VALID CONTRACT FOR EMPLOYMENT BETWEEN THE SCHOOL AND ANY EMPLOYEE MUST BE IN WRITING AND SIGNED BY THE HEADMASTER.

I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status or, if aliens, their legal authorization to work in the U.S. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by law. SDS participates in the e-Verify program.

Signature of Applicant

Date