

**MANCHESTER LOCAL SCHOOL DISTRICT**

6075 Manchester Rd., Akron, OH 44319

**CLASSIFIED APPLICATION FOR EMPLOYMENT**

Submit one application per position for which you wish to apply. Applications lacking sufficient information will be rejected. Please be sure to fill out both sides of this form. Also note that this complete form will become part of a public record when submitted.

**PERSONAL INFORMATION**

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (M.I.) \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Other) \_\_\_\_\_

Social Security No. \_\_\_\_\_

Social Security numbers are used to match individuals with their application/employment file. Disclosure of your SSN is voluntary; however, this or other nine-digit number is necessary to process your application. Upon appointment and pursuant to section 5101.312 of the Revised Code and certain other laws and regulations, a request of your SSN is mandatory. Your SSN may be used for purposes including but not limited to the following: Identification of obligators under child support orders, detection of welfare fraud, processing background checks and tax information or general employee identification. Your SSN will be protected in accordance with the applicable law.

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The following will be used only as it is directly related to the position you are applying.

- 1. Are you a licensed driver, and do you have reliable transportation to and from work? Yes \_\_\_ No \_\_\_
- 2. Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present or most recent employer? Yes \_\_\_ No \_\_\_
- 3. Have you every been discharged or asked to resign from a prior position? Yes \_\_\_ No \_\_\_
- 4. Have you ever been convicted of, found guilty of, or pled guilty to any misdemeanor other than traffic offenses? Yes \_\_\_ No \_\_\_
- 5. Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_  
If you answered "Yes" to question 5, please explain fully. \_\_\_\_\_

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- 6. Have you ever had a criminal conviction expunged? Yes \_\_\_ No \_\_\_
- 7. Do you have pages on social media platforms? Yes \_\_\_ No \_\_\_  
If so, are your sites public? Yes \_\_\_ No \_\_\_
- 8. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List? Yes \_\_\_ No \_\_\_
  - a. Have you used any position of prominence you have with any country to persuade others to support an organization on the US Department of State Terrorist Exclusion List? Yes \_\_\_ No \_\_\_
  - b. Have you knowingly solicited funds or other things of value for an organization on the US Department of State Terrorist Exclusion List? Yes \_\_\_ No \_\_\_
  - c. Have you committed an act that you know, or reasonable should have known, affords "material support or resources" to any organization on the US Department of State Terrorist Exclusion List? Yes \_\_\_ No \_\_\_
  - d. Have you ever hired or compensated a person you knew to be a member of an organization on the US Department of State Terrorist Exclusion List, or a person you know to be engaging in planning, assisting, or carrying out an act of terrorism? Yes \_\_\_ No \_\_\_

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**POSITION FOR WHICH I AM APPLYING:**

<input type="checkbox"/> Secretary	<input type="checkbox"/> Cook/Kitchen	<input type="checkbox"/> Aide, Classroom	<input type="checkbox"/> Aide, Bus	}	<input type="checkbox"/> Full Time
<input type="checkbox"/> Bus Driver	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Custodian	<input type="checkbox"/> Mechanic		<input type="checkbox"/> Part Time

**LICENSES, REGISTRATION, AND CERTIFICATES**

Be sure to include any valid driver license or CDL required for the job title

License/Certification issued by      Field/Trade Specialization      License Certificate No:      Expiration

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**EDUCATION**

High School Graduate? Yes \_\_\_ No \_\_\_      GED? Yes \_\_\_ No \_\_\_

Name/Location of High School: \_\_\_\_\_

GED Certificate No: \_\_\_\_\_ Issued by: \_\_\_\_\_

**POST HIGH SCHOOL EDUCATION**

School Name & Location      Major Area of Study      Degree or Certificate

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**OTHER TRAINING**

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**WORK EXPERIENCE**

In the areas below, please list your work experience beginning with your most recent employment.

Military experience and volunteer work may also be included as employment.

Note: In order to be considered for employment, you must fill in the information below accurately and completely.  
(You may submit a resume in addition to completing this section)

Employer: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: - (Street, City, Zip): \_\_\_\_\_

Job Title: \_\_\_\_\_ Job Duties: \_\_\_\_\_

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From: \_\_\_\_\_ To: \_\_\_\_\_ Salary/Wage: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: - (Street, City, Zip): \_\_\_\_\_

Job Title: \_\_\_\_\_ Job Duties: \_\_\_\_\_

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From: \_\_\_\_\_ To: \_\_\_\_\_ Salary/Wage: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**WORK EXPERIENCE (cont.)**

Employer: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: - (Street, City, Zip): \_\_\_\_\_

Job Title: \_\_\_\_\_ Job Duties: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Salary/Wage: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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**CERTIFICATION**

I certify that the answers I have made to all the questions in this application are true and complete to the best of my knowledge. I understand that if this application is not completed in its entirety, it will not be processed and I will automatically be disqualified. I understand that I am responsible for the correctness of this application. I also understand that a criminal record background check will be required prior to employment, and that in accordance with the Drug-Free Workplace Program, drug testing may be required.

I waive all provisions of law forbidding colleges, universities, or past employers from disclosing any information which they acquired relevant to my employment. I consent that they may disclose such information to the human resources personnel of Manchester Local Schools in relationship to the position for which I am applying. I understand that any offer of employment is conditional upon proof of legal authorization to work in the United States as required by the Immigration Reform and Control Act.

**I acknowledge and understand that the Manchester Local Schools will rely on the information I provide in this application. If at any time during subsequent employment with Manchester Local Schools any response to the information requested in this application is determined to be false, incomplete, inaccurate or misleading, it will be grounds for my immediate dismissal from employment.**

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_