

# South Bend School District #118

PO Box 437, South Bend WA 98586  
Tel. (360) 875-6041

## CLASSIFIED APPLICATION FOR EMPLOYMENT

To Applicant: We deeply appreciate your interest in our school district and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications.

### *Personal*

Date \_\_\_\_\_

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

Last
First
Middle

Present Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  

No.
Street
City
State
Zip

Position Applied for: \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ per hour

Do you have any physical condition which may limit your ability to perform the job for which you are applying? \_\_\_\_\_

If yes, describe such condition \_\_\_\_\_

What method of transportation will you use to get to work? \_\_\_\_\_

Were you previously employed by the district? \_\_\_\_\_ If yes, when? \_\_\_\_\_

List any friends or relatives working for us \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_

Are there any experiences, skills, or qualifications which you feel would especially fit you for work with our school district?

\_\_\_\_\_  
 \_\_\_\_\_

### *Record of Education*

School Name	City and State	No. Years Completed	Graduation Date	Degree and Major
High School				
College/Vocational Training				
College/Vocational Training				

Are you a Highly Qualified Paraprofessional? [  ] Yes [  ] No

If yes, Date passed test \_\_\_\_\_ or College Degree (AA or BA) \_\_\_\_\_ or 72 College Credits \_\_\_\_\_

## *Employment History*

Are you currently employed? \_\_\_\_\_

Please describe below your past four employment positions beginning with the most recent.

Name and Address of Employer	Type of Business	Dates of Employment	Position & Duties	Reason for Leaving	May we contact this employer?
Name of Supervisor					
Telephone					

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May we contact the employers listed above? \_\_\_\_\_ If not, indicate who you do not wish us to contact \_\_\_\_\_

### *Personal References* (Not Former Employees or Relatives)

Name and Occupation	Address	Phone Number

### *Additional Information*

Do you speak, write or understand any foreign languages? \_\_\_\_\_

If yes, which language(s)? \_\_\_\_\_

**By signing below, I give the school district permission to inquire about my background by interviewing other people, contacting past employers and through police background checks.**

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date