

Today's Date: _____

BROOKVILLE LOCAL SCHOOLS

75 June Place
Brookville, OH 45309
(937) 833-2181

CLASSIFIED APPLICATION

1. PERSONAL DATA

Name _____ Available to Sub? _____ Yes _____ No
Address _____ Home No. _____ Cell _____
City _____ State _____ Zip Code _____ E-mail _____

2. POSITION(S) DESIRED

() Aide () Bus Driver () Clerical () Custodian/Maintenance () Food Service () Other _____

3. SPECIAL SKILLS (Check skills that apply for clerical or maintenance position)

Clerical

____ Bookkeeping
____ Computer
____ Filing
____ Photocopier

Maintenance

____ Telephone
____ Typing (wpm _____)
____ Word Processing
____ Air Conditioning
____ Carpentry
____ Electrical
____ Heating
____ Painting
____ Plumbing

For all other positions, list skills related to the position: _____

4. EDUCATION

	<u>Name and Location</u>	<u>Diploma or Degree</u>	<u>Area of Concentration</u>
High School	_____	_____	_____
College	_____	_____	_____
Other	_____	_____	_____

5. EXPERIENCE (List most recent experience first)

NAME	SUPERVISOR	POSITION
ADDRESS	TELEPHONE (include area code)	EMPLOYED FROM - TO (MO/YR)
CITY/STATE/ZIP	REASON FOR LEAVING	
NAME	SUPERVISOR	POSITION
ADDRESS	TELEPHONE (include area code)	EMPLOYED FROM - TO (MO/YR)
CITY/STATE/ZIP	REASON FOR LEAVING	
NAME	SUPERVISOR	POSITION
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NAME	SUPERVISOR	POSITION
ADDRESS	TELEPHONE (include area code)	EMPLOYED FROM - TO (MO/YR)
CITY/STATE/ZIP	REASON FOR LEAVING	

6. PERSONAL REFERENCES (List complete name and address including zip code)

NAME	NAME
ADDRESS	ADDRESS
CITY/STATE/ZIP	CITY/STATE/ZIP
TELEPHONE (include area code)	TELEPHONE (include area code)
NAME	NAME
ADDRESS	ADDRESS
CITY/STATE/ZIP	CITY/STATE/ZIP
TELEPHONE (include area code)	TELEPHONE (include area code)

7. You may include your personal resume and any additional information that may be helpful in consideration of your employment.

8. ADDITIONAL INFORMATION

Have you ever been involuntarily terminated from employment in a previous job? Yes No
 If yes, please give the name of the company, date, and the reasons for termination:

You are not required to disclose information about physical or mental limitations that you believe will not interfere with your ability to do the job. If you want the employer to consider special arrangements or accommodate a physical or mental impairment, you may identify that impairment in this space and suggest the accommodations you believe appropriate:

Have you lived in Ohio the past five years? Yes No

I *certify* that answers given herein are true and complete to the best of my knowledge.

I *authorize* you to make such investigations and inquiries of my employment history, criminal record, and other related matters as may be necessary in arriving at an employment decision.

I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application.

In the event of my employment, I understand that false or misleading information given in my application or interview(s) may result in discipline up to and including discharge. I understand, also, that I am required to abide by all rules and regulations of the Brookville Local School District.

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, ancestry, citizenship, age, marital status, veteran status, or the presence of a non-job-related medical condition or handicap.

Signature: _____ Date: _____