CONESTOGA VALLEY SCHOOL DISTRICT 2110 Horseshoe Road Lancaster, PA 17601



Application for Employment: Classified Positions

Dear Applicant:

Food/Service

Thank you for your interest in Conestoga Valley School District. Please make sure your answers are complete and accurate. Information provided in the application is confidential.

The Conestoga Valley School District is an EQUAL OPPORTUNITY INSTITUTION. We consider all applicants without regard for race, religion, gender, veteran status, or disability. We are in accordance with all applicable state and federal laws. For additional information, contact the Director of Administrative and Business Services who has been designated compliance officer.

The school district considers all applicants who possess the ability to perform the essential functions of the job for which they have applied – with or without reasonable accommodations. Should reasonable accommodations be required during the interview process, please inform us so that we can oblige your request.

If you are offered a job with the school district you will be required to submit to a pre-placement physical examination which will include a drug test. A physician(s) designated by the district will perform the examination.

Clerical/Aides:

Send your application to one of the following addresses:

Custodians/Maintenance:	Personnel Office								
CV Service Building	CV School District								
160 Newport Road 2110 Horseshoe Road									
Leola, PA 17540	Lancaster, PA 17601								
Please tell us for which job you are applying									
1. Department CustodianTeacherMaintenanceClericalFood ServiceCafeteria/Playground AideOther:	1 3/1 /								
Personal Information									
Today's Date:	Social Security Number:								
Name:Last Address:	First Middle Initial								
Address	City/Town State Zip Telephone								

			Education						
Name of Institution		Location		Years Attended	Date Graduated	Subject Studied		Degree	
High Schoo	ol:			rttended	Graduated St		cu		
College:									
Trade, Busi Correspond	iness, lence School:								
		T)	Vouls Exmensiones		1	1			
	us where you re the dates of	have worked. List	Vork Experience the last four (4) emp	oloyers, sta	arting with the	he mos	t rece	ent. Be	
Date (From-To)	Name of Employer	Address	Position/Duties	Reason f Leaving	for Immed Superv		Telephone		
Please ans	wer the follow	ving questions:							
Y	es	oeen involuntarily te No of employer:	rminated by another	employer	?				
Ez	xplain the circ	umstances:							
	Explain any gaps in employment? Have you been in the military service?								
	If so, what branch? Served from: To: Duties:								
5. A	re you present	ly employed? Yes_	NoWhere	e?					
6. H	Are you presently employed? YesNoWhere?								
	Do you know anyone who is currently employed by Conestoga Valley School District and if so, who?								
8. Ha	Have you ever applied for employment with Conestoga Valley School District before? Yes No								
9. A	re you current	ly employed and, if	so, at what wage rate	e?					
10. W	hat wage rate	do you desire if hire	ed by Conestoga Val	llev Schoo	ol District?				

11. How do you plan to get to work?									
12. Have you ever been disciplined for safety violations? Yes No									
13. Have you ever been disciplined for attendance? Yes No									
14. Do you smoke? Yes No									
Do you intend to maintain your present employment if hired by Conestoga Valley School District and, if so, the hours?									
Would you be able to work overtime and weekends?									
Are you currently on layoff and subject to recall?									
References									
To be considered for employment by Conestoga Valley Schools, you must provide three references. If you are presently employed, one of those references must be your present supervisor. The other two should be able to vouch for your character, dependability, and ability to do the work required. They not be members of the supervisory staff of your present employer. Do not include relatives. If not present employed, use your last supervisor. May we contact prior employers if you receive an interview? Yes No	nay								
Name Address Business Telephone Years Acquainted Person's Title/J	ob								
Applicant's Statement of Verification and Authorization I certify that the statements indicated herein are true and correct to the best of my knowledge. I									
understand that falsifications or omission of any information during the application process could rest in termination of my employment. I also understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Conestoga Valley School District and myself. I also understand that if I am hired, my continued employment shall be at the will of the Conestoga Valley School District and may be terminated at any time by either party. No promises regarding employment have been made to me and I understand that such promise or guarantee is binding upon the Conestoga Valley School District unless made in writing I understand that, if offered employment, I must submit to a comprehensive physical examination by a designated physician. That examination will include a drug test and monitored performance of such physical tasks as required by the job description. Any offer may be withdrawn if an applicant fails the	t no ng.								
examination or drug test. All candidates for a given position will have the same examination. I also understand that, if accepted for employment, I shall abide by all the rules and policies of the Conestog Valley School District.									
Signature: Date:									

This application expires 366 days from date of signature.