



FRANCIS PARKER SCHOOL EMPLOYMENT APPLICATION

Please print or type your answers to all questions completely and accurately.

Equal Opportunity Employer: It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment. We are an equal opportunity employer. This means that all our employment decisions are made without unlawful considerations of race, race-related traits, color, sex (including pregnancy, childbirth, breastfeeding and related medical conditions), gender, gender identity or expression, sexual orientation, marital status, religion, national origin, citizenship, ancestry, age, mental or physical disability, medical condition, genetic information or characteristics, military or veteran status, unpaid intern or volunteer status, or any other classification protected by applicable local, state, or federal laws, or on the basis of any perception that an applicant or employee has any of these characteristics or on the basis that an applicant or employee is associated with someone who has or is perceived to have these characteristics. All qualified applicants with criminal histories will be considered in a manner consistent with the law, including the requirements of the Fair Chance Act, if applicable.

GENERAL INFORMATION	Name (Last) (First) (Middle)			Date:	
	Present Address (Number & Street) (City) (State) (Zip)			Primary Phone:	
	Email Address			Cell Phone:	
	Position desired	Department	Available for: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Seasonal / Temp	Date Available	Salary Expected
	Are you available for work on weekends? <input type="checkbox"/> Yes <input type="checkbox"/> No Evenings? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	What days and hours are you available for work?				
	Can you, after employment is offered, provide verification of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, are you eligible to obtain a valid work permit with approval from your school and guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Have you previously applied, interviewed, volunteered, or worked at Francis Parker School? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify for what position and identify the dates you applied, interviewed, volunteered or worked: _____ - _____		How did you hear about Francis Parker School?		
	Do you have any friends or relatives employed at Francis Parker School? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please identify the name and department for each: _____				
	Upon review of the job description for this position, are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No				

EDUCATION	Schools	Names and Locations of Institutions	Major/Minor, Type of Training	Did you graduate?	Type of diploma, degree, license, or certificate earned
	High School				
	College				
	Graduate School				
	Vocational / Technical				
Courses, workshops, seminars, and other specialized or advanced training:					

EMPLOYMENT Please give an accurate, complete full-time and part-time employment record. Start with your present or most recent employer first. If you need additional space, please continue on a separate sheet of paper.

1	Company/Employer	Telephone ()
	Address	Employed (state month and year) From To
	Name of Supervisor	Reason for leaving
	Job Title and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time _____ Average hours/week

2	Company/Employer	Telephone ()
	Address	Employed (state month and year) From To
	Name of Supervisor	Reason for leaving
	Job Title and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time _____ Average hours/week

3	Company/Employer	Telephone ()
	Address	Employed (state month and year) From To
	Name of Supervisor	Reason for leaving
	Job Title and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time _____ Average hours/week

EMPLOYMENT - Continued

4	Company/Employer	Telephone ()
	Address	Employed (state month and year) From To
	Name of Supervisor	Reason for leaving
	Job Title and Responsibilities _____ _____	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time _____ Average hours/week

5	Company/Employer	Telephone ()
	Address	Employed (state month and year) From To
	Name of Supervisor	Reason for leaving
	Job Title and Responsibilities _____ _____	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time _____ Average hours/week

REFERENCES

Please provide the names of three (3) individuals who can speak to your professional qualifications. One of these individuals must include your most recent supervisor.

Name	Relationship	Local Phone #
1. _____		
2. _____		
3. _____		

SKILLS

Check if you have had experience in the following areas:

GENERAL:

- Accounting Development Public Relations Marketing/Communications
 Education Fundraising Operations Facilities Maintenance IT

MANAGEMENT:

- Recruitment/Hiring Employee Scheduling Employee Relations/Disciplinary Action
 Teambuilding Employee Training Employee Evaluations

Number of Staff Supervised: _____

CLERICAL:

- Computer Literate on: Windows Mac
 Word Excel Access PowerPoint Outlook/Gmail Data Entry
 Desktop Publishing Graphics Accounting Software Fundraising Software

Use this space to describe the experiences you have checked above or any other job-related skills and qualifications you have acquired. _____

AGREEMENT AND SIGNATURE

Please read carefully, initial each paragraph, and sign below:

I certify that the information contained in this application is correct to the best of my knowledge. I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that falsification of any information, including any material omission or misstatement of material fact, on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. _____ (initial).

In considering my application for employment, I want Francis Parker School (the "School") to verify the information set forth on this application and obtain any additional information relating to my background it may need to assess my suitability for employment. Accordingly, I authorize all persons, schools, companies, corporations, credit bureaus, and law enforcement agencies to supply the School with information relating to my background and I do hereby release all such parties who provide information to the School from any and all liability for damages that may result from furnishing the same. _____ (initial).

I understand that as a condition of employment with the School, I will be required to sign an authorization permitting the School to conduct an investigation, including a background check. I will be notified of such an investigative report if obtained, to the extent required by law. The School will use any such report(s) solely for employment-related purposes. I also understand that, upon written request, I may obtain additional information about this report under the requirements of the federal Fair Credit Reporting Act. _____ (initial).

Upon accepting employment, I will be provided with an Employee Handbook. I acknowledge my understanding that the benefits, policies, and programs stated in the Employee Handbook are provided at the School's discretion and may be changed or eliminated at any time, except the policy of at-will employment. If employed, it shall be my responsibility to familiarize myself and follow all policies and regulations relating to my employment. In accepting employment, I acknowledge that the policies and benefits and other programs as set forth in these documents are not meant to infer or imply a contract of employment for a specified period between the School and myself, or otherwise change the at-will nature of my employment. In consideration of my employment, I agree to conform to the School's rules and regulations. _____ (initial).

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the School. In addition, I understand and agree that if I am employed, every aspect of my employment relationship with the School is on an at-will basis, meaning it is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the School. As part of this at-will policy, I understand that the School expressly reserves its inherent authority to manage and control the business enterprise and to exercise its sole discretion to determine all issues pertaining to my employment, including all matters pertaining to promotion, job assignment, the size of the workforce, demotion, transfer, and discipline. I further understand that no School supervisor or manager has any authority to enter into any agreement, written or verbal, or make any promises or representations on behalf of the School that are contrary to the foregoing, unless made in writing and signed by me and the School's designated representative. _____ (initial).

I understand that prior to employment, or from time to time during the course of my employment if I am hired, I may be required, to the extent permitted by law, to take a physical examination, including drug screen, or similar test or examination, as a condition of hiring or continued employment. _____ (initial).

I understand that the School requires as a condition of employment that I test negative for tuberculosis (TB). _____ (initial).

I acknowledge receipt of the "Privacy Notice and Disclosure to Job Applicants" provided to me by the School pursuant to the California Consumer Privacy Act of 2018, and I read and understood it prior to my disclosure to the School of my personal information. _____ (initial).

I have read and understand the foregoing paragraphs and voluntarily agree to them.

Date _____ Signature _____