

Staples-Motley School District #2170

EMPLOYMENT APPLICATION

To the Applicant: We appreciate your effort in completing the application so we may give you the fullest consideration possible for employment. We wish to thank you for your interest in our district. Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

We are an Equal Employment Opportunity Employer.

Please print clearly

Today's Date: _____ Date you would be available for Employment: _____

Position(s) applied for (*please check all that apply*):

Food Service Custodial Transportation Paraprofessional Office Other: _____

Location(*please circle all that apply*): High School Middle School Elementary District Wide

Full Name: _____

Address: _____

Email address: _____

Phone number: _____

Have you been employed by our School District before? Yes ___ No ___

If yes Name used:

Are you available for work: Full Time ___ Part Time ___ Shift Work ___

Are you a Citizen of the United States: Yes ___ No ___

Do you have any physical mental or medical impairment or disability that would limit your job performance for the position for which you are applying? Yes ___ No ___.

If yes, please explain: _____

VETERAN STATUS

Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to claim Veteran's Preference Points? Yes ___ No ___

Do you wish to claim Veteran's Preference Points? Yes ___ No ___

If yes, please complete the attached Veterans Preference Points Application

Past Employment Experience

List each job held. Start with your present or most recent job. Include any military assignments and volunteer activities.

Employer: _____ Supervisor: _____

Job Title / Position: _____

Dates worked: _____

Contact Number: _____

Duties performed: _____

Reason for leaving this job: _____

Summarize any special skills and qualifications you may have acquired from previous employers or other experience you may have: _____

Employer: _____ Supervisor: _____

Job Title / Position: _____

Dates worked: _____

Contact Number: _____

Duties performed: _____

Reason for leaving this job: _____

Employer: _____ Supervisor: _____

Job Title / Position: _____

Dates worked: _____

Contact Number: _____

Duties performed: _____

Reason for leaving this job: _____

Employer: _____ Supervisor: _____

Job Title / Position: _____

Dates worked: _____

Contact Number: _____

Duties performed: _____

Reason for leaving this job: _____

EDUCATION

Name of school or Institution: _____

Courses of Study: _____

Dates of Attendance: _____ Degree/Diploma _____

Major/Minor _____ Honors/Received _____

Name of school or Institution: _____

Courses of Study: _____

Dates of Attendance: _____ Degree/Diploma _____

Major/Minor _____ Honors/Received _____

Name of school or Institution: _____

Courses of Study: _____

Dates of Attendance: _____ Degree/Diploma _____

Major/Minor _____ Honors/Received _____

Name of school or Institution: _____

Courses of Study: _____

Dates of Attendance: _____ Degree/Diploma _____

Major/Minor _____ Honors/Received _____

REFERENCES

Name: _____ Phone _____ Title _____

Name: _____ Phone _____ Title _____

Name: _____ Phone _____ Title _____

AGREEMENT

I certify that the answers I have given on this application are true and correct to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview (s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the school.

Signature: _____ Date: _____

