



**THE SCHENCK SCHOOL
APPLICATION FOR EMPLOYMENT
WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER**

APPLICANT'S STATEMENT: I understand that The Schenck School (School) is committed to providing equal opportunity in all employment practices, including but not limited to selection, hiring, promotion, transfer, and compensation to all qualified applicants and employees without regard to age, race, color, national origin, sex, religion, handicap or disability, genetic information, citizenship status, service member status, or any other category protected by federal, state, or local law.

I authorize former and present employers, and professional, work, and personal references listed in the application or interview process and any other individuals I may name, to give the School or its designee any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release such parties from all liability for any damages that may result from furnishing same to the School. I also authorize the School to provide truthful information concerning my employment (if any) with it to future employers or as may be required, and I agree to hold it harmless for providing such information.

I understand that the School reserves the right, to the extent permitted by law, to require drug and alcohol screening tests of an applicant or an employee either prior to employment or any time during employment and I hereby give my consent to any such tests. I consent to the release of the results of any such tests to the School or its designees. I release the School and its designees from any and all liability and damages that may result or arise from any drug test or the provision of information in connection with such a test.

I understand that this employment application and any other School documents are not promises of employment. Should I be employed, I understand that I will be an at-will employee unless I am offered a written contract with a specific duration. I further understand that, if I am employed, I can terminate my employment at any time with or without cause and with or without advance notice and that the School has a similar right. I understand that no manager, representative, or agent of the School has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing, except that the Head of School may do so in writing. If I am hired under a contract, the contract will control the terms of my employment. In the event of my employment with The Schenck School, I will comply with all rules and regulations of the School.

In return for the School's agreement to arbitrate legal disputes and for considering this application, I agree by signing below that any dispute of a legal nature arising under federal, state, or local law between me and the School (including any such claim regarding discrimination, harassment, or any other legal dispute relating to my employment arising under any labor, employment, or civil rights law) will be subject to final and binding arbitration in accordance with the School's arbitration procedures. I understand that the arbitrator, who will serve as judge and jury, has the same authority to award money damages and other relief, as does a court or jury. If employed, and if required, I agree to sign a stand-alone arbitration agreement that would supplement this one. The School's arbitration procedures are available for my review on request.

I certify that the information given by me on this application and during the interview process is and will be true and complete in all respects, and I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the School's judgment) that I will be disqualified from consideration for employment or subject to immediate termination if discovered after I am hired.

I certify that I have received a separate written notification that the School may obtain "consumer reports" (for example, criminal history, driving records, etc.) on me for use in connection with my application and, if I am hired, my employment. I authorize the School to obtain such reports.

This application will be considered "active" for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THESE STATEMENTS.

_____ Date

_____ Applicant's Signature

Each inquiry on this application must be fully answered or completed. Otherwise, you will not be considered for employment.

PERSONAL DATA

Last Name	First Name	Middle Name	E-Mail Address
Present Address Street and Number City, State, Zip		How long have you lived there: Years _____ Months _____	
Previous Address Street and Number City, State, Zip		How long did you live there: Years _____ Months _____	
Telephone Number(s) (Home, Cell, other)		Are you 18 years of age or older: <input type="checkbox"/> Yes <input type="checkbox"/> No	

CURRENT AND PREVIOUS EMPLOYMENT

Please list the names of your present and previous employers in chronological order with present or last employer listed first. Include part-time, seasonal and all other employment. If self-employed, give company name and supply business references. If you need more space, use a separate sheet of paper. **DO NOT ANSWER "SEE RESUME."** Fill out this form **completely**.

Employer 1		Dates Employed		Work Performed
		From	To	
Telephone Number(s)				
Address		Rate/Salary		
		Starting	Final	Were you ever disciplined? If so, for what?
Job Title	Supervisor Name & Title			
Reason for Leaving				
Employer 2		Dates Employed		Work Performed
		From	To	
Telephone Number(s)				
Address		Rate/Salary		
		Starting	Final	Were you ever disciplined? If so, for what?
Job Title	Supervisor Name & Title			
Reason for Leaving				
Employer 3		Dates Employed		Work Performed
		From	To	
Telephone Number(s)				
Address		Rate/Salary		
		Starting	Final	Were you ever disciplined? If so, for what?
Job Title	Supervisor Name & Title			
Reason for Leaving				
Employer 4		Dates Employed		Work Performed
		From	To	
Telephone Number(s)				
Address		Rate/Salary		
		Starting	Final	Were you ever disciplined? If so, for what?
Job Title	Supervisor Name & Title			
Reason for Leaving				

FOR FACULTY POSITIONS ONLY

How many complete school years have you been employed as a full-time teacher? _____

Which grade levels have you taught: _____

Are you certified? Yes No If yes, field(s) _____ and expiration date(s) _____

BACKGROUND INFORMATION

Position Desired: _____ (Only list one choice)

Placement Desired: Full-Time Part-Time Temporary Minimum Acceptable Pay Rate: _____

When are you available for work? _____

Are you currently working? Yes No If "yes", name of employer: _____

How many scheduled work days did you miss in the last 24 months, not including vacations, holidays and approved leave? _____

Please explain fully any gaps in your employment history. Be sure to account for all periods of time including military service and any period of unemployment.

List any other names which you may have used and which will be necessary to verify prior to your employment: _____

If hired, can you provide proof that you are legally entitled to work in the U.S.? Yes No

If not, what steps must be taken for you to begin employment lawfully? _____

Have you ever been terminated or asked to resign from any job? Yes No

Has a school ever not offered you a contract for the next school year? Yes No

If yes to either question above, please explain circumstances (use a separate sheet of paper if necessary): _____

May we contact your current employer? Yes No If no, please explain: _____

Have you ever worked for The Schenck School? Yes No If yes, please give dates and position: _____

Do you have any friends or relatives working here? Yes No If yes, name(s) and relationship: _____

How were you referred to us? _____

Do you have any commitments to any other employer which may affect your employment? Yes No

If yes, explain: _____

Do you smoke or use tobacco? _____

EDUCATION

Education	Years Completed (Circle)	School Name & Location (City, State)	Degree Obtained	Describe Major
High School	9 10 11 12			
College/University	1 2 3 4			
Graduate/Professional	1 2 3 4			
Trade or Correspondence				

OTHER INFORMATION

Describe any specialized experience, training, skills and/or extra-curricular activities _____

List any professional or occupational registration, licensure, or certification you currently hold which may be applicable: _____

Please provide any other information or comments, or describe any other experience that you have which would be relevant to the job for which you are applying: _____

Why do you want to work for The Schenck School? _____

Please describe your immediate career goals: _____

Please describe your long term career goals: _____

Have you ever been a defendant in a civil suit on an intentional tort (assault, battery, false imprisonment, invasion of privacy, intentional infliction of emotional distress, intentional wrongful death)? Yes No

CRIMINAL HISTORY

Have you ever plead no contest, nolo, or guilty to a crime, or been convicted of a crime? Yes No
You are not required to identify convictions that have been sealed, expunged or fall under a First Offender law.

Are any charges currently pending against you? Yes No Has any adjudication ever been withheld? Yes No

(NOTE: Answering "yes" to these questions does not constitute an automatic bar to employment. The Company will consider the nature of the crime, its seriousness, the substantial relation to the position's functions and qualifications, the number of occurrences, the applicant's age at the time of the crime, the time elapsed since the crime, the applicant's entire work and educational history, employment references and recommendations, and the business necessity of any exclusion when required by state, local, or federal law.)
If you answered yes to any of the preceding questions, please give dates and details:

DRIVING INFORMATION (Complete only if driving is an essential function of the job for which you are applying).

Do you have a current valid driver's license? Yes No If yes, License No.: _____ State: ____ Expiration Date: _____

If you do not have a driver's license for the state in which you currently reside, why not? _____

Has your license ever been suspended or revoked? Yes No If yes, explain: _____

Do you have personal automobile insurance? Yes No If no, explain: _____

Have you ever been denied personal automobile insurance or has it ever been terminated or suspended? Yes No If yes, explain: _____

Have you ever been convicted, pled guilty, or pled nolo to a charge of DWI or DUI? Yes No

Are any such charges currently pending against you? If yes to either question, explain: _____

Please list all moving traffic violations in the last five (5) years:

OFFENSE	DATE	LOCATION	COMMENTS