

HARWOOD UNIFIED UNION SCHOOL DISTRICT

APPLICATION FOR EMPLOYMENT (SUPPORT STAFF/SUBSTITUTE)

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

***=Not applicable to subs**

(PLEASE PRINT)

Position(s) Applied for: _____

Date of Application: _____

Name: Last _____ First _____ MI _____

Address: _____

Phone Number(s): _____

Social Security Number: XXX-XX-_____ (last 4 numbers only)

Email address: _____

Best time to contact you: _____ a.m. or p.m.

Have you ever filed an application with us before? Yes No
If yes, give date: _____

Have you ever been employed with us before? Yes No
If yes, give date: _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? (proof of citizenship is required upon employment) Yes No

Date available for work: _____ What is your desired salary range? _____

*Are you available to work: Full time Part time Temporary

*Are you currently on "lay-off" status and subject to recall? Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Do you need any special accommodations to do the work of this job? Yes No
 If yes, please specify: _____

Has any disciplinary action been brought against you that resulted in you being discharged from employment?	___Yes ___No
Have you ever been dismissed from any employment or resigned or retired to avoid any disciplinary action?	___Yes ___No
Are you facing disciplinary action in your current employment?	___Yes ___No
<p>IF YOU ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, provide complete description of circumstances, including names of representatives of employer who are familiar with circumstances. You may attach another page if necessary.</p>	

Have you ever had a professional credential or license suspended, revoked or denied? If yes, provide a complete description of the circumstances, including type of license or credential, reason for & the location and date of suspension, revocation, or denial. You may attach another page if necessary.	___Yes ___No
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If you have a resume that includes education and work experience, you may attach it to this application and skip these two sections (Education and Work Experience).

EDUCATION

School	Name & Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (specify)				

WORK EXPERIENCE. List all previous employers. Attach additional pages, if necessary. Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, sexual orientation, or other protected status.

	Dates Employed
Employer: _____	From _____ to _____
Address: _____	Hourly Rate/Salary
Phone: _____	Start _____ Final _____
Starting/Present Job Title: _____	
Supervisor: _____	May we contact? ___Yes ___No
Work performed: _____	

Reason for leaving: _____	

	Dates Employed
Employer: _____	From _____ to _____
Address: _____	Hourly Rate/Salary
Phone: _____	Start _____ Final _____
Starting/Present Job Title: _____	
Supervisor: _____	May we contact? ___Yes ___No
Work performed: _____	

Reason for leaving: _____	

Dates Employed

Employer: _____ From _____ to _____

Address: _____ Hourly Rate/Salary

Phone: _____ Start _____ Final _____

Starting/Present Job Title: _____

Supervisor: _____ May we contact? ___Yes ___No

Work performed: _____

Reason for leaving: _____

Dates Employed

Employer: _____ From _____ to _____

Address: _____ Hourly Rate/Salary

Phone: _____ Start _____ Final _____

Starting/Present Job Title: _____

Supervisor: _____ May we contact? ___Yes ___No

Work performed: _____

Reason for leaving: _____

COMMENTS: Include explanation of any gaps in employment.

Describe any specialized training, apprenticeship or skills you may have and any extra-curricular activities.

Describe any job-related training received in the United States military.

List professional, trade, business or civic activities and offices held. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities, sexual orientation, or other protected status.

Other qualifications. Summarize special job-related skills and qualifications acquired from employment or other experience.

SPECIALIZED SKILLS (Skills/Equipment)

PC/Mac Word Processing
 Spreadsheets Internet/e-mail
 Production/Mobile Machinery (list): _____

State any additional information you feel may be helpful to us in considering your application.

PROFESSIONAL REFERENCES* Please include letters of reference as well.

Name	Phone No.	Best Time to Call	Occupation

*Other references will be checked.

APPLICANT'S STATEMENT

I certify that the information given herein is accurate and complete 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.

I agree to cooperate with further background checks, which are prerequisites to employment, by providing fingerprints and releases necessary to obtain any other information, including court and law enforcement records necessary to verify the information provided on the application. I understand that employment offers are made subject to completion of criminal record and background investigations.

I understand that failure to provide complete and accurate background information could result in the removal of my application from consideration for employment, or termination of employment conditioned on the completion of a background investigation.

I further understand that if nondisclosure is discovered and I assert that my failure to provide complete details was not intentional, I will be required to show that my failure to disclose resulted from misunderstanding or inadvertence.

Signature of Applicant

Date