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| Date of Application: |  |

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| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  |  |  |
|  | Last |  | First |  | Middle Initial |

|  |  |
| --- | --- |
| Address: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Home Telephone: |  | Work/Msg Phone: |  |

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| --- | --- | --- | --- |
| Social Security Number: |  | Driver’s License Number: |  |

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| --- | --- | --- | --- | --- |
| Are you over the age of 18? | Yes: |  | No: |  |

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| SPECIFIC POSITION(S) APPLYING FOR: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Secretarial/Clerical |  |  | Classroom Aide |
|  |  |  |  |  |
|  | Substitute Teacher |  |  | Maintenance / Custodian |
|  |  |  |  |  |
|  | Food Service |  |  | Other |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Have you submitted an application with Chugach School District previously? | | | | Yes: |  | No: |  |
| If yes, give date: |  | and position applied for : |  | | | | |

*The application will remain on file for one year from the date of application only; it must be renewed if further consideration for a position is desired.*

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **EDUCATION** | | | | | | | |
| School | Name |  | Location  City& State |  | Dates Attended |  | Diploma or Degree |
| Last High School Attended |  |  |  |  |  |  |  |
| College or University |  |  |  |  |  |  |  |
| Business or Trade |  |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |  |
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| If you did not receive a degree, indicate the number of college hours attended: |  |

(Please attach your college transcript with this application.)

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| 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. |

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| EXPERIENCE | | | | | | | | | | |
| List All Work Experiences – Use Separate Sheet if Necessary | | | | | | | | | | |
| From |  | To |  | Number of Years |  | Name and Address of Employer |  | Immediate Supervisor |  | Type of Job |
|  |  |  |  |  |  |  |  |  |  |  |
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| REFERENCES | | | | |
|  | | | | |
| Full Name of Reference |  | Telephone # |  | Address |
|  |  |  |  |  |
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| If you have a relative who works for this District or who serves as a member of the School Board of Education, please give their name and address: |
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| List any additional information you think would be helpful concerning your knowledge, skills, and experience related to the job for which you are applying: |
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| Briefly state what you feel you can contribute as an employee of the Chugach School District in the position for which you are applying: |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| Do you have any physical limitations or disabilities that may prevent you from performing the job | | | | | | | |
| for which you are applying? | Yes: |  |  | No: |  |  |
| If yes, please explain: | | | | | | | |
|  | | | | | | | |
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| --- | --- |
| What accommodations may be necessary to enable you to perform your work? | |
| Please describe: |  |
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|  |  |  |  |  |
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| Have you been convicted of an offense involving moral turpitude within the past ten (10) years? | | | | |
| Yes: |  | No: |  |  |

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| Do you have any legal issues or convictions that we need to be aware of? | | | | |
| Yes: |  | No: |  |  |

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| --- |
| *(NOTE: A conviction is not an automatic bar of employment. Each case is considered on its own merit.)* |

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| --- | --- | --- | --- | --- |
| Have you ever been dismissed, asked to resign from any position, or subject to non-renewal of contract? | | | | |
| Yes: |  | No: |  | If yes, please explain: |
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| AGREEMENT  I hereby certify that the above information, to the best of my knowledge, is true, accurate, and complete. Any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the District, which reserves the right to accept or reject it. I further agree to observe all rules, regulations, and policies of the District now in force and effect, or as they change during my employment, if I am employed by the District. |

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| Signature of Applicant |

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| I hereby authorize Chugach School District to conduct work history, personal reference or police record inquiries to determine my acceptability of employment. |

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| Signature of Applicant |