

NORTHERN VALLEY USD#212

512 W. Bryant PO Box 217

Almena, KS 67622

Email:

ktharman@usd212.com

Personal Information

APPLICATION FOR EMPLOYMENT

Name (Last Name First)		Social Security Number	
Present Address		City	State
Past Address		City	State
Are You 18 Years Old Or Older? <input type="checkbox"/> YES <input type="checkbox"/> NO	Phone		

Desired Employment

Position		Date You Can Start	
Are You Employed Now? <input type="checkbox"/> YES <input type="checkbox"/> NO	If So, May We Contact Your Current Employer? <input type="checkbox"/> Yes <input type="checkbox"/> NO		
Have You Ever Worked For Northern Valley USD #212 Before? <input type="checkbox"/> Yes <input type="checkbox"/> NO	When?	What Position Did You Hold?	
Reason For Leaving			
Name Of Last Supervisor At Northern Valley USD#212			

High School

Name And Location of School	Diploma <input type="checkbox"/> Yes <input type="checkbox"/> No	If Not, GED <input type="checkbox"/> Yes <input type="checkbox"/> No
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Post-Secondary Education

Name and Location of School	Credits Earned	Degree	Major

General

Special Training or Skills Relevant to This Position

- Have you ever been convicted of, or currently charged with, a crime other than a minor traffic violation?
 Yes No
- Have you ever been charged with a crime involving dishonesty? Yes No
- Have you ever been charged with a crime involving a controlled substance? Yes No
- Have you ever been involved with a crime involving a child? Yes No
- Have you ever entered into a diversion agreement after being charged with any crime described in questions 1 - 4 above? Yes No
- Are criminal charges pending against you, in any state, involving any of the offenses described in questions 1 - 4 above? Yes No

Employment History

LIST BELOW STARTING WITH THE MOST RECENT EMPLOYER

Name of Previous Employer				
Address		City	State	Zip
Start Date	End Date	Job Title		
Starting Salary (Please Indicate Yearly / Weekly / Hourly)	Ending Salary (Please Indicate Yearly / Weekly / Hourly)	May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name Of Supervisor		Title	Phone	
Duties				
Reason For Leaving				

Name of Previous Employer				
Address		City	State	Zip
Start Date	End Date	Job Title		
Starting Salary (Please Indicate Yearly / Weekly / Hourly)	Ending Salary (Please Indicate Yearly / Weekly / Hourly)	May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name Of Supervisor		Title	Phone	
Duties				
Reason For Leaving				

Name of Previous Employer				
Address		City	State	Zip
Start Date	End Date	Job Title		
Starting Salary (Please Indicate Yearly / Weekly / Hourly)	Ending Salary (Please Indicate Yearly / Weekly / Hourly)	May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name Of Supervisor		Title	Phone	
Duties				
Reason For Leaving				

Name of Previous Employer				
Address		City	State	Zip
Start Date	End Date	Job Title		
Starting Salary (Please Indicate Yearly / Weekly / Hourly)	Ending Salary (Please Indicate Yearly / Weekly / Hourly)	May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name Of Supervisor		Title	Phone	
Duties				
Reason For Leaving				

References

PLEASE PROVIDE NAMES OF THREE INDIVIDUALS WHO ARE NOT RELATED TO YOU AND YOU HAVE KNOWN AT LEAST THREE YEARS

Name	Address	Title	Phone
Name	Address	Title	Phone
Name	Address	Title	Phone

AUTHORIZATION

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION. I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY 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, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE,"

Signature	Date
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You will be required to sign the application when you are interviewed for this position.