SCHOOL DISTRICT OF OWEN-WITHEE

APPLICATION FOR EMPLOYMENT

SECTION 1 PERSONAL DATA					
Applicant's Full Name:	Last	First		Middle	
Phone Number:		If 1	not a U.S. Citizen,	type of visa:	
Address:	Street	City	State	Zip code	
Employment Acceptable:	FulltimePart-	timeSchool YearTen	nporarySubs	stitute	
Date available for employm	ent:				
In what states have you resident the states have you resident to the states have you resident have you resident to the states have you resident had not have you resident have you resident had not have you resident had		thday? Approximate dates (Mor	nth/Year):		
State:		Approximate dates (Mor	nth/Year):		
State:		Approximate dates (Mor	nth/Year):		
State:		Approximate dates (Mor	nth/Year):		
2. Have you ever been cor 3. Have you ever been arr 4. Have you ever been cha 5. Have you ever been cor 6. Have you ever been arr 7. Have you ever been cha 8. Have you ever been cor 9. Have you ever been arr 10. Have you ever been cha 11. Have you ever been cor 12. Have you ever been cor 13. Have you ever been cor 14. Have you ever been cor 15. Has your professional li 16. Have you ever been dis Yes No 17. Have you ever been the 18. Have you ever been the 19. Have you ever been der 20. Is disciplinary action cu May we conduct a personal	avicted of an offense of ested for a felony? arged with a felony? avicted of a felony? ested (even if no contemporated for an act of violated	other than a minor traffic violation. Yes No Yes No Yes No Yes No Set or charges dropped or pled do set or c	wn) for a sex-relate wn) with a sex-relate wn) of a sex-relate wn) for a drug-relate wn) with a drug-relate? Yes Note? Yes Note? Yes Note where employer? Yes Note? Yes Note? Yes Note? Yes Note? Yes Note? Yes Note? Yes Note where employer?	ated offense? Yes ated offense.	

NOTE: Because of the nature of this position, applicants with conviction records who are invited to an employment interview will be asked to discuss this information. A conviction record will not be used as criterion in making an employment decision unless the circumstances of the offense substantially relate to the circumstances of this position.

In order to conduct a background check, the district must distinguish between people having the same name. For this reason, please provide your full middle name and date of birth:

SECTION 2

EDUCATIONAL PREPARATION AND TRAINING

School	Name and Address	Course of Study	Circle Last Year Completed	Year Graduated
HIGH SCHOOL OR GED	Name		1 2 3 4	
	City, State			
VOCATIONAL TECHNICAL	Name		1 2 3 4	
BUSINESS SCHOOL	City, State			
COLLEGE	Name		1 2 3 4	
	City, State			
	Name		1 2 3 4	
	City, State			
Additional related course	es/training other than studies listed	d above:		
Certifications or Professi	onal Licenses: Type	State	Expiration Date Nun	nber
SECTION 3	PR	EVIOUS EXPERIENCE		
	s. List present or most recent pos		ne your qualifications for this posi Include all part-time jobs, militar	
Employer's Name:			Phone Number:	
Address:			Job Title:	
City, State:			Supervisor:	
Reason for Leaving:			Dates Worked:	
Describe duties:				
Employer's Name:			Phone Number:	
Address:			Job Title:	
City, State:			Supervisor:	
Reason for Leaving:			Dates Worked:	
Describe duties:				

Employer's Name:			Phone Number:
Address:			Job Title:
City, State:			Supervisor:
Reason for Leaving:			Dates Worked:
Describe duties:			
Employer's Name:			Phone Number:
Address:			Job Title:
City, State:			Supervisor:
Reason for Leaving:			Dates Worked:
Describe duties:			
	List any other emp	loyment not shown above on separate	sheet.
SECTION 4		REFERENCES	
Please list references (not rel	latives or supervisors) to con	tact who have knowledge of your qual	ifications.
Name	Title	Company/Address	Telephone
Name	Title	Company/Address	Telephone
Name	Title	Company/Address	Telephone
DESCRIBE YOUR SKILLS applying that you are skilled applications.)	E: List all office machines, he in operating. (For example,	eavy equipment, or other equipment repersonal computer, front-end loader, o	elated to the position for which you are convection oven, network systems, software

your success in this position. Please mention volunteer wor	written statement to include any experience or talent, which will contribute to ork, life experiences, co-curricular activities, community involvement, travel, es, which would be helpful in considering your qualifications.
READ THE FOLLOWING CAFEFULLY BEFORE SI	IGNING:
obtain from any source regarding my education, experience the position for which I applied or in which I may be emplo this application is true, complete, and correct to the best of	e of my application for employment or during the course of my employment to be, criminal background, competence, character, or medical history, as it relates to oyed unless otherwise stated below. I certify that the information contained in f my knowledge and belief. I understand that any falsification or omission of on of this application. I agree that all statements made in this application may be
Signature	Date

The School District of Owen-Withee is an equal opportunity employer and does not discriminate against applicants on the basis of race, creed, sex, sexual orientation, national origin, disability, age, political affiliation, or any other reason prohibited by law.

SCHOOL DISTRICT OF OWEN-WITHEE
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