

Date distributed _____

**JOINT SCHOOL DISTRICT NO. 365
BRUNEAU-GRAND VIEW
P.O. Box 310
Grand View, Idaho 83624
208-834-2253 FAX 208-834-2293**

Equal Opportunity Employer

RETURN APPLICATION TO:

Superintendent
Joint School District No. 365
P.O. Box 310
Grand View, ID 83624

**APPLICATION
FOR CLASSIFIED POSITION**

(Please type or print)

Position Applied for _____ Date _____

Name _____
Last First Middle

Social Security Number _____ Date Available for Employment ____/____/____
Day Month Year

Present Address _____
Street City State Zip

Present Telephone Number (____) _____ Message Telephone Number (____) _____

Permanent Address _____
Street City State Zip

Have you worked for Joint School District No. 365 before? [] Yes [] No If yes, give the date(s) and your name as it appeared on our payroll record _____

I certify that I have never been convicted or received a withheld judgment for any felony or misdemeanor except a minor traffic violation: That I have not been the subject of a valid report of child abuse or neglect, or the subject of a valid report of adult abuse. All convictions or withheld judgments, except for minor traffic violations, must be listed. The existence of a criminal record does not constitute an automatic bar to employment.

Signature _____ Date _____

This application will be considered only if all questions are answered and all sections completed. Selected applicants will be called for personal interviews, which are required before hiring.

PERSONAL REFERENCES

Names and Occupation	Address	Phone Number
1.		
2.		
3.		

EDUCATION

Type of School	Name & Address of School	Dates Attended From To	Graduated Yes No	Course or Major	Degree Received
High School					
College					
Business/Trade					
Other					

PRIOR WORK HISTORY—List employment history, beginning with your most recent employment. You may attach a resume or additional sheets if required. Explain any lapse in employment on the back page.

1.

Name and Address of Employer _____

Employed from _____ to _____. Exact Title or Position _____

Name of Supervisor _____ Telephone Number (____) _____

Reason for Leaving _____

Description of Duties and Responsibilities _____

2.

Name and Address of Employer _____

Employed from _____ to _____. Exact Title or Position _____

Name of Supervisor _____ Telephone Number (____) _____

Reason for Leaving _____

Description of Duties and Responsibilities _____

3.

Name and Address
of Employer _____

Employed from _____ to _____. Exact Title or Position _____

Name of Supervisor _____ Telephone Number (____) _____

Reason for Leaving _____

Description of Duties and Responsibilities _____

4.

Name and Address
of Employer _____

Employed from _____ to _____. Exact Title or Position _____

Name of Supervisor _____ Telephone Number (____) _____

Reason for Leaving _____

Description of Duties and Responsibilities _____

List all other pertinent work experience, volunteer work, and/or military experience below:

I hereby certify that the information contained in this application is a true and complete statement of my personal record to date. If employed, any misstatement or omission of fact on the application or interview may result in my dismissal.

Signature of Applicant

Date