

# Application for Employment

## Orient-Macksburg Community School

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We consider applicants for all positions without regard to race, color religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
How Did You Learn About This Position?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative
<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name
Address	Street	City
		State
		Zip Code
Telephone Number		Social Security Number

If you are under 18 years of age, can you provide required proof of your eligibility to work  Yes  No  
 Have you ever filed an application with us before?  Yes  No

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?  Yes  No  
 (Proof of citizenship or immigration status will be required under employment?)

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full Time  Part Time  Temporary

Have you been convicted of a felony within the last 7 years?  Yes  No  
 Conviction will not necessarily disqualify an applicant from employment

If yes, please explain \_\_\_\_\_

# Employment History

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, handicap or other protected status.

1. Employer		Dates Employed		Work Performed	
		From	To		
Address					
Telephone Number(s)		Hourly Rate/Salary			
		Starting	Final		
Job Title	Supervisor				
Reason for Leaving					
2. Employer		Dates Employed			Work Performed
		From	To		
Address					
Telephone Number(s)		Hourly Rate/Salary			
		Starting	Final		
Job Title	Supervisor				
Reason for Leaving					
3. Employer		Dates Employed		Work Performed	
		From	To		
Address					
Telephone Number(s)		Hourly Rate/Salary			
		Starting	Final		
Job Title	Supervisor				
Reason for Leaving					
4. Employer		Dates Employed			Work Performed
		From	To		
Address					
Telephone Number(s)		Hourly Rate/Salary			
		Starting	Final		
Reason for Leaving					

**Special Skills and Qualifications**

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

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**Applicant's Statement**

I certify that answers given herein are true 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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_

Signature of Applicant \_\_\_\_\_  
Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview    \_\_\_Yes    \_\_\_No                      Date of Interview \_\_\_\_\_

Remarks \_\_\_\_\_

Employed    \_\_\_Yes    \_\_\_No                      Date of Employment \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly Rate \_\_\_\_\_ Department \_\_\_\_\_

Hired By \_\_\_\_\_

**NOTES**

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