

APPLICATION FOR EMPLOYMENT

TO CLASSIFIED POSITION

AN EQUAL OPPORTUNITY EMPLOYER

DOVER CITY SCHOOL DISTRICT
BOARD OF EDUCATION

219 WEST SIXTH STREET
DOVER, OHIO 44622

PLEASE PRINT

Date of Application _____

NAME: _____
(Last) (First) (Middle)

ADDRESS: _____
(Street) (City, State) (Zip Code)

Number of years at above address: _____

Telephone Number: (Check which preferred) _____ Home: _____
_____ Work: _____

**NOTICE: CAFETERIA WORKERS, CUSTODIANS/MAINTENANCE WORKERS AND
SECRETARIAL POSITIONS REQUIRE PASSING A CIVIL SERVICE TEST.**

Position Applying for: _____ Bus Driver _____ Cafeteria Worker
_____ Custodian/Maintenance _____ Educational Aide
_____ Secretarial _____ Other: _____
(Specify)

Date Available: _____

Referral Source: _____ Newspaper advertisement _____ Employee Referral
_____ Walk-in applicant _____ Other: _____
(Specify)

Have you ever applied for a position with the school district?
_____ Yes _____ No If "Yes", when? _____

Have you ever been employed by the school district?
_____ Yes _____ No If "Yes", when? _____

Are you currently employed?
_____ Yes _____ No If "Yes", where? _____

Do you have a relative working for the school district?
_____ Yes _____ No If "Yes", state identity and relationship. _____

EDUCATION DATA				
School	Print Name, Street, City, State and Zip Code	No. of Years Completed	Degree	Major Course of Study
High School				
College				
Trade, Business, Night or Corresp. School				
Other				

In the following spaces give a complete record of your employment history, including periods of unemployment, if any. Begin with most recent employment and work back.

1.

EMPLOYMENT HISTORY		
Employer:	Employed:	Starting position:
Address:	From _____ Mo/Yr	Last position:
Telephone:	To _____ Mo/Yr	Other positions held:
Duties:	Immediate supervisor:	
Starting Salary (Wage):	Final Salary (Wage):	

2.

EMPLOYMENT HISTORY		
Employer:	Employed:	Starting position:
Address:	From _____ Mo/Yr	Last position:
Telephone:	To _____ Mo/Yr	Other positions held:
Duties:	Immediate supervisor:	
Starting Salary (Wage):	Final Salary (Wage):	

3.

EMPLOYMENT HISTORY		
Employer:	Employed:	Starting position:
Address:	From _____ Mo/Yr	Last position:
Telephone:	To _____ Mo/Yr	Other positions held:
Duties:	Immediate supervisor:	
Starting Salary (Wage):	Final Salary (Wage):	

4.

EMPLOYMENT HISTORY		
Employer:	Employed:	Starting position:
Address:	From _____ Mo/Yr	Last position:
Telephone:	To _____ Mo/Yr	Other positions held:
Duties:	Immediate supervisor:	
Starting Salary (Wage):	Final Salary (Wage):	

5.

EMPLOYMENT HISTORY		
Employer:	Employed:	Starting position:
Address:	From _____ Mo/Yr	Last position:
Telephone:	To _____ Mo/Yr	Other positions held:
Duties:	Immediate supervisor:	
Starting Salary (Wage):	Final Salary (Wage):	

ADDITIONAL INQUIRIES CONCERNING EMPLOYMENT HISTORY

1. May we contact your employer(s)? Present Employer: Yes No
Previous Employer(s): Yes No

Please identify any exceptions and reasons for not contacting: _____

2. In order to permit a check of your work and education records, should we be made aware of any change of name or assumed name that you previously used?

Yes No If "Yes", identify name(s) and relevant dates, _____

MILITARY EXPERIENCE

Have you ever served in the U.S. Armed Forces? Yes No

Describe any special job-related training received: _____

OTHER SPECIAL SKILLS

Describe any other special job-related skills or qualifications that would support your application: _____

REFERENCES

(List three (3) DO NOT INCLUDE relatives or former employees)

Name	Address	Phone Number	How Long Known

