

APPLICATION FOR EMPLOYMENT

TO CLASSIFIED POSITION

AN EQUAL OPPORTUNITY EMPLOYER

**DOVER CITY SCHOOL DISTRICT
BOARD OF EDUCATION**

228 WEST SIXTH STREET
DOVER, OHIO 44622

Date of Application _____

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

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

Number of years at above address: _____

Email Address: _____

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

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: _____ Online Job Posting _____ 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? _____

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

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

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Address:		Last position:
Telephone:		Other positions held:
Duties:	Immediate supervisor:	
Starting Salary (Wage):	Final Salary (Wage):	

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Duties:	Immediate supervisor:	
Starting Salary (Wage):	Final Salary (Wage):	

ADDITIONAL INQUIRIES CONCERNING EMPLOYMENT HISTORY

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

Please identify any exceptions and reasons for not contacting: _____

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: _____

PROFESSIONAL REFERENCES: Please list three; do not include relatives			
Name	Address	Phone Number	How Long Known

IN CASE OF EMERGENCY OR ACCIDENT, whom shall we notify?

Name: _____

Home Address: _____ Business Address: _____

Home Telephone: _____ Business Telephone: _____

GENERAL INFORMATION

Are you authorized to work in the United States?

Yes No

Are you over 18 years of age?

Yes No

Please write a brief statement explaining why you are interested in this position:

APPLICANT'S STATEMENT

I hereby affirm that the information on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment and activities. I agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information.

I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status or, if aliens, their legal authorization to work in the U.S. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by the law.

ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT IS GUILTY OF FALSIFICATION UNDER SECTION 2921.13 OF THE REVISED CODE, WHICH IS A MISDEMEANOR IN THE FIRST DEGREE.

Signature of Applicant

Date