

EARLE SCHOOL DISTRICT

CLASSIFIED APPLICATION FOR EMPLOYMENT

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, disability or other protected classification.

This application remains active for thirty (30) days.

PERSONAL DATA		
FIRST NAME	DATE	
LAST NAME	SIGNATURE	
SOCIAL SECURITY #	DATE OF BIRTH	
ADDRESS:	PHONE (Home): _____	Email:
	Cellular #: _____	
	Message #: _____	
CITY	STATE	ZIP CODE

For what position(s) are you applying? Secretary Clerk Typist Aide Nurse Grounds
 Maintenance Custodial Food Service Bus Driver
 Other

Are you eighteen (18) years of age or older? _____ Have you ever been convicted of a felony? _____

*In compliance with Arkansas Law 6-17-414, the Earle School District requires a criminal background check of all new employees. Refusal to consent to a criminal background check will remove an applicant from consideration for employment.

PREVIOUS EMPLOYMENT		
START DATE	END DATE	
COMPANY	TYPE OF BUSINESS	
ADDRESS	PHONE	EMAIL
CITY	STATE	ZIP CODE
YOUR POSITION	YOUR MANAGER	
REASON FOR LEAVING	MAY WE CONTACT	YES / NO (circle one)

START DATE	END DATE	
COMPANY	TYPE OF BUSINESS	
ADDRESS	PHONE	EMAIL
CITY	STATE	ZIP CODE
YOUR POSITION	YOUR MANAGER	
REASON FOR LEAVING	MAY WE CONTACT	YES / NO (circle one)

OTHER WORK EXPERIENCE YOU FEEL IS PERTINENT TO THIS APPLICATION:

EARLE SCHOOL DISTRICT

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REFERENCES				
NAME	OCCUPATION	RELATIONSHIP	PHONE	EMAIL

Please state briefly why you want to work for the Earle School District and why you are interested in the particular job for which you are applying:

The facts set for in my application for employment shall be considered true and complete. I understand that, if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

I waive the right to view or examine any personal or employment reference forms that are completed and returned to the District by the persons whom I list as references on this application.

Signed: _____ Date: _____