

FAYETTE SCHOOL DISTRICT R-III

705 Lucky Street, Fayette, Missouri 65248

Telephone: 660/248-2153

APPLICATION FOR NON-CERTIFIED EMPLOYMENT

PERSONAL

Name and Address of Applicant:

(First Name) (Middle Name) (Last Name) (Social Security Number)

(Street) (City) (State) (Zip Code) (Area Code/Telephone Number)

How many years have you lived at this address? _____

Previous Address:

(Street) (City) (State) (Zip Code)

How long did you live there? _____

Job(s) applied for: 1. _____ Rate of Pay Expected \$ _____

2. _____ Rate of pay expected: \$ _____

How did you learn of this opening? _____

Do you want to work ___ Full time or ___ Part time? Specify days and hours if part time: _____

Would you work the evening shift? ___ Have you worked for us before? ___ If yes, when? _____

List any friends or relatives working for us: _____

If hired, on what date will you be available to start work? _____

Are there any other experiences, skills, or qualifications that you feel would especially fit you for work with this district? _____

It is the policy of the Fayette School District to provide equal opportunities for employment, promotion and education without regard to sex, age, color, creed, national origin or handicap.

Person to be Notified in Case of Accident or Emergency:

Name: _____ Phone Number: _____

(Street)

(City)

(State)

EDUCATIONAL BACKGROUND

Type of School	Name & Address	# Years Attended	Graduated		Course
Grammar			Yes	No	
High School			Yes	No	
College			Yes	No	
Post Graduate			Yes	No	
Business/Trade			Yes	No	
Other			Yes	No	

MILITARY SERVICE RECORD

Have you ever served in the armed forces? ____ Yes ____ No If yes, what branch? _____

Dates of duty: From _____ To _____
(Month) (Day) (Year) (Month) (Day) (Year)

Rank at Discharge: _____ What were your duties in the Service? (Include special training and duty station.) _____

PERSONAL REFERENCES

(Excluding Former Employers or Relatives)

Name and Occupation

Address

Phone Number

1. _____

2. _____

3. _____

PRIOR WORK HISTORY (List in order, last or present employer first)

Dates From To	Name & Address of Employer	Rate of Pay		Supervisor's Name
		Start	Finish	Title & Phone
Reason for Leaving		Describe in detail the work you did.		
Dates From To	Name & Address of Employer	Rate of Pay		Supervisor's Name
		Start	Finish	Title & Phone
Reason for Leaving		Describe in detail the work you did.		
Dates From To	Name & Address of Employer	Rate of Pay		Supervisor's Name
		Start	Finish	Title & Phone
Reason for Leaving		Describe in detail the work you did.		
Dates From To	Name & Address of Employer	Rate of Pay		Supervisor's Name
		Start	Finish	Title & Phone
Reason for Leaving		Describe in detail the work you did.		
Dates From To	Name & Address of Employer	Rate of Pay		Supervisor's Name
		Start	Finish	Title & Phone
Reason for Leaving		Describe in detail the work you did.		

May we contact the employers listed above? _____ If not, indicate below which one(s) you do not wish us to contact:

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PLEASE READ CAREFULLY
APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified 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.

Signature of Applicant: _____ Date: _____