

EMPLOYMENT APPLICATION — CERTIFICATED PERSONNEL

Trico C. U. S. D. #176
P.O. Box 220
Campbell Hill, IL 62916

(Please type or print)

Position (s) Applied For		Date of Application	
Certificate Type & Number:			
Name			
Last		First	Middle
Address			
Street		City	State/Zip
Telephone Number ()		Social Security Number	
Have you ever filed an application with us before?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		If yes, date _____	
Have you ever been employed with us before?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		If yes, date _____	
Are you currently employed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
May we contact your present employer?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
On what date would you be available for work?		_____	
Are you available to work:		<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time
		<input type="checkbox"/> Temporary	

We consider applicants without regard to race, color, creed, religion, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

We are an equal opportunity employer.

Education

	Name/ Address	Course of Study	Years Completed	Diploma/ Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Trade School/ Other				

Indicate any foreign languages you can speak, read, and/or write: _____

Describe any specialized skills or training: _____

List any professional, business, or civic activities and/or offices held: _____

Employment Experience

Start with your present or most recent job. Include any volunteer work or military related job experience.

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

If you need additional space, please continue on a separate sheet.

References

1.	_____	_____
	Name	Phone

	Address	
2.	_____	_____
	Name	Phone

	Address	
3.	_____	_____
	Name	Phone

	Address	

Applicant's Statement

I certify that information given herein is true and complete to the best of my knowledge.

I authorize Trico C.U.S.D. #176 to research information contained in this application for employment purposes.

In the event of employment with Trico C.U.S.D. #176, I understand that false and/or misleading information given in this application or in interview(s) may result in discharge from employment and may constitute a Class A misdemeanor.

Signature Of Applicant

Date