**Adel School District #21**

357 North L Street

Lakeview, Oregon 97630

(541) 947-5418

**Employment Application**

**Position Applying For:**  \_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_

What date are you available to start work? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 Home Work Cell

Are you a veteran? Yes No Are you a handicapped Veteran? Yes No

Are you eligible to work in the United States? Yes No

Have you been convicted of or pleaded no contest to a felony within the last 5 years? Yes\_\_\_\_\_ No \_\_\_\_\_\_

**Work History** – it is not necessary to go back more than 10 years

* **Current or Last Position**

Employer Address

Supervisor Telephone

Position Title \_\_\_\_\_\_\_ From/To \_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Responsibilities \_\_\_\_\_\_\_\_

Reason for Leaving \_\_\_\_\_\_

* **Previous Position**

Employer Address

Supervisor Telephone

Position Title \_\_\_\_\_\_From/To \_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Responsibilities \_\_\_\_\_\_\_\_

Reason for Leaving \_\_\_\_\_\_

- over -

**Employment Application – Continued**

* **Previous Position**

Employer Address

Supervisor Telephone

Position Title \_\_\_\_\_\_\_ From/To \_ \_\_\_\_\_\_\_ \_\_\_\_\_\_

Responsibilities \_\_\_\_\_\_\_\_

Reason for Leaving \_\_\_\_\_\_

**May we contact your present employer?** Yes No

**Skills/Qualifications** – Please list special skills, licenses, training, awards, experience working with youth, etc.

**Education –** list the most recent schooling first

**Institute Location Dates Diploma/Degree**

1.

2.

3.

**References –** persons who are not related to you and who are able to answer questions regarding your qualifications for the position you are seeking.

**Name Address Phone Number** (home/Work)

1.

2.

3.

I certify that the information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

I understand that I must have a valid driver’s license and pass a background test and drug test.

Signature Date

**Please attach a resume.**

Adel School District #21 practices equal employment opportunity and treatment regardless of race, national origin, religion, sex, age, marital or parental status and disability if the disability does not preclude performance of bona fide requirements of the position with or without reasonable accommodation. Adel School District considers the use or abuse of drugs or alcohol on the job by employees to be an unsafe and detrimental work practice.