

SUPPORT STAFF APPLICATION FORM

POSITION APPLYING FOR

DATE OF APPLICATION

NAME: _____

MAILING ADDRESS: Number / Street / Road _____ Apt. # or P.O. Box _____

City _____ State _____ ZIP CODE _____

Home Telephone # _____ Cell Phone # _____ Email Address _____

ARE YOU PRESENTLY EMPLOYED? _____ PRESENT/LAST SALARY _____

(hrly/wkly/yrly)

ARE YOU A U.S. CITIZEN? _____ YES _____ NO

CURRENT EMPLOYER: _____

ADDRESS/CURRENT EMPLOYER: _____

CONTACT PERSON: _____ PHONE #: _____

MAY YOUR PRESENT EMPLOYER BE CONTACTED? Yes No

WHEN WOULD YOU BE AVAILABLE FOR A PERSONAL INTERVIEW? _____

WORK EXPERIENCE:

Name/Address of Employer	Supervisor's Name & Phone Number	OK to contact? (yes/no)	Nature of Work	Employment Dates From - To	Reason for Leaving

EDUCATION AND PROFESSIONAL TRAINING:

List High Schools, Colleges/ Technology School &/or Universities Attended	Location	Years Attended or Graduated & Degrees Received	Area of Study

ARE YOU PRESENTLY WORKING TOWARD A HIGHER DEGREE? YES NO
 IF "YES," WHAT IS YOUR EXPECTED COMPLETION DATE AND DEGREE EXPECTED? _____

CHARACTER REFERENCES:

NAME	POSITION TITLE	ADDRESS	PHONE NUMBER & EMAIL ADDRESS

EXPERIENCE WORKING WITH STUDENTS: List experiences you have had working with young people, i.e., scout work, summer camps, etc.

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO
 IF "YES," INDICATE THE TYPE OF CONVICTION, DATE, AND COURT WHERE THE CONVICTION OCCURRED:

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR (excluding a minor traffic offense)? YES NO (Note: Conviction record will not necessarily be a bar to employment.)

I hereby consent that any former or current employer, whether named in this application or not, may release all employment records of the applicant to the District. I also consent to a physical and drug test as part of the screening process. I understand I must undergo a Criminal History Record Check.

I hereby authorize the District to inquire and verify any information contained on this application for employment, and the District shall not be liable for any damages which may result from such inquiry or verification. I understand that making any misleading or untruthful statement on this application may result in my dismissal. If accepted for employment, I understand that this application will become a permanent part of my personnel records.

I further agree to comply with all rules, regulations, and policies of Manistee Area Public Schools and agree that my employment status is "at will" and, thus, I may be terminated for cause or no cause at any time, and I may terminate my employment at any time for any reason. Upon my termination, I authorize the release of reference information regarding my work history with Manistee Area Public Schools."

Signature (Full Name)

Date

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or handicap.